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Anagogic Psychoanalysis

(After a Lecture Held May 19 1920, Before the Psychological-Philosophical Society at Goteborg, Sweden.)

By DR. EMANUEL OF GEIJERSTAM, Goteborg.

We all know what an important role the forbidden plays in the teachings of Freud. He defines conscience as follows: "Conscience is the inner perception of the rejection of certain wishes existing within us." (*Imago*, 1912; "Das Tabu".) The ethical standards which have arisen as the result of training and environmental influences are, according to Freud, incompatible with our instincts, with our sexuality. That the sexual instinct generates the feeling of guilt is a common human experience which the psychotherapist has an uncommonly good opportunity to verify. The question is whether the feeling of guilt, in its deepest sense, actually has its roots in sexuality. Let us first consider what may be called an elementary example, viz.: the classical type, commonly called sexual neurasthenia. A neurotic of this type usually has been addicted to masturbation, he has read "house physicians" who have taught him the alleged evils of the so-called "secret" vice. I may point out that the writings which inspire neurotics with fear do not always emanate from quacks. There are to this day more physicians than one would think credible, who represent in these matters a viewpoint which has be-

come an anachronism. (As to the non-injuriousness of onanism consult the writings of Dr. W. Stekel.) The neurotic is induced on account of his hypochondriac motives to engage in a bitter struggle against masturbation. These motives, as we know, are usually fortified by religious scruples, since the neurotic's education leads him to identify sexuality with sinfulness. It is well known—and a fact frequently stressed by Freud—that the worst neurotic conflicts break out precisely when the struggle against masturbation has been won and the habit has been given up. In very serious cases the whole sexual instinct may be completely suppressed. In its place the patient displays anxiety and eventually other neurotic symptoms. Undoubtedly Freud is correct when he teaches that in such cases the sexuality is repressed, driven out of consciousness. As is well known, Freud also says that the neurotic does not succeed thereby in getting rid of his sexuality. The latter still persists in the unconscious and presses forward for expression. As it is not permitted to come to the surface it breaks through in the form of anxiety. The libido becomes transformed into anxiety. Freud sees in this a process

of self-punishment and states very properly that to a certain extent all anxiety represents the operation of conscience. Anxiety appears to be the result of a feeling of guilt which has its roots in sexuality.

But upon analysing neurotics of this type I have been unable for my part to convince myself that this is a fact. A couple of years ago I treated a 22-year old neurotic. In the course of a dream analysis he gave the following association: "I recall how I prayed very fervently to God one day, some time ago, to protect me against the habit of masturbation." Following the analytic technique of Dr. Stromme I asked whether he had fought the day before against the habit. He had not. But his whole day had been filled with terror concerning the coming Easter preparations. He was employed in a store. He had in fact uttered a pious little prayer. He had prayed to God to save him from having to work. I asked whether he could recall having felt better after the prayer. He was surprised at that, but answered very promptly that he recalled very distinctly that this had not been the case. He now saw the reason for it. The same patient reacted to another dream with the following association: "I must absolutely give up masturbation, otherwise I shall become so sick that I shall have to take my life." Here there was a similar relationship. The day before he had actually thought to himself: "Work will yet drive me to suicide." In other words, in his unconscious phantasy he regarded masturbation in the same light as work. Undeniably it sounds rather far-fetched to find the sign of equation between onanism and work. One may also raise

the objection that such examples are accidental, and that these proofs point to no more than a rather superficial play on words. But I am in a position to quote masses of similar examples. It not infrequently happens that young students act before their comrades as if they are lazy, as if they took pride in being lazy, when as a matter of fact they are really fairly diligent. They do their work secretly just as they secretly masturbate. Moreover, the neurotic is often conscious of a similar attitude towards work as towards sexuality, of course, without being aware of the parallel. He believes he has become ill on account of overwork, he is afraid of the evil consequences of hard work, just as he is afraid of masturbation. In fact he fears the loss of energy (a narcissistic factor). Moreover, it is very convenient and therefore very easy for the neurotic to attribute the responsibility to something he has already done and cannot undo. (It is, in fact, a typical neurotic wish, observable in many patients, that they are uncommonly keen to know when and how their neurosis had its genesis. A person would rather trace something to the remote past than to yesterday.) If in the course of his treatment a neurotic dreams that he has kissed a woman, he usually feels better the following day and is better able to work. As I have pointed out in a previous lecture, I stand decidedly upon a broader libido concept and I see in the sexual libido only a portion of the general interest in life. The dream depicts *pars pro toto*, the sexual object instead of the life aim. Particularly in woman's consciousness, man and marriage stand as specific representatives of the life aim. A similar role is played in the case of the

male by the thought of founding his own home. The sexual in dreams has not merely a literal meaning, but above all, a symbolic, an anagogic significance.

Freud, as is well known, lets his patients associate freely, requests them to give free course to the flow of thoughts and to relate without the least control everything that comes to consciousness. Freud states that when our customary purposive thinking is abandoned, the unconscious assumes the determinative role for the content of our associations. We also find that the sexual plays the same role in the free associations roused during the waking state as in the dream. We may have a sexual parallel to the previous day's activity, though that need not necessarily be the case. But an anagogic parallel does seem always to be present. Upon a more careful scrutiny of the matter, it is not very surprising after all, if, as Stromme has recently expressed it, analysis discloses a possible equation between sexuality and work. It is well known that, in spite of the most careful explanation showing that masturbation is but an infantile or juvenile form of gratification of the sexual instinct and that it need not be considered in itself harmful to health, the sexual neurasthenic is relatively seldom able to overcome his hypochondriac fears. When the orthodox conception of the sixth commandment comes into play, it naturally aggravates the despair of the neurotic. The modern translation of that commandment ("Thou shalt not commit adultery") has, in my experience, the effect of supporting the therapist's efforts to some extent. An orthodox patient usually looks eagerly for a free thinker in his physician, *i. e.*, some one to rid him of his qualms of conscience.

I am reminded particularly of an elderly, pious school-teacher who suffered from so-called "sexual excitation," *i. e.*, masturbation. It was hopeless to try to touch upon that subject with her. Through hypnosis her sexual excitability was diminished and after a certain measure of self-criticism she thanked me because she believed herself as well as it was possible for her to be. In the last analysis it is surprising, however, that these patients, aside from their religious views, find it so hard to forgive themselves their masturbation habit. Freud, as is well known, states that the symptom is a substitute gratification for sexuality. In anagogic terms this means that there is something purposive back of every symptom. Stromme states very properly, that there is truth in all compulsive thoughts—if only they are rightly interpreted. That is true also here. There is a valid reason why the sexual neurasthenic cannot forgive himself. The fact is he has committed the so-called sin against the Holy Ghost, a transgression for which no one has yet been able to achieve self-forgiveness. With the overcoming of his masturbation and the repression of his sexuality, he has also lost his pleasure in life, he has repressed his pleasure in work,—hence the feeling of guilt. What breaks into the field of consciousness in the form of anxiety is not sexuality alone, but also the (similarly repressed) joy in work. The primary factor of the neurosis consists in the shrinking back from exertion. The neurotic, to use Stromme's expression, does not want to expend his energy. And there is profound truth in the saying that avarice is the root of all evil. Freud continually reiterates that our moral self wants to know nothing

of our sexuality. It becomes, so to speak, a negative, proscriptive conscience. Freud speaks of the self-judging factor, the censorship, our conscience. (Cf. his "A General Introduction to Psycho-analysis".) It is the factor which exercises a censorial influence on dreams at night and through which the repressed energies break forth. But in a deeper sense we have in our unconscious a moral self which refuses to know that a natural instinct is being repressed as something abhorrent, just as it does not tolerate the repression of the craving for work. The sexual neurotic who overcomes his masturbation habit without overcoming the neurosis, suffers, strictly speaking, from anxiety not because he has masturbated, but because he did not dare continue the habit—from the anagogic standpoint, because he fails to give proper expression to the craving for life and work. And the orthodox teaching, according to which he ought to be satisfied to be free from his sexual longings, helps him as little as any alleged free-thinking attitude. Failure properly to express the natural cravings generates a feeling of guilt. Freud says that the neurotic represses his sexuality because of a feeling of guilt. That is correct insofar as it explains the attitude of the neurotic towards his struggle against his instinctive cravings. But as I see it, the truth is rather that he has the feeling of guilt *because* he has repressed his sexuality. When the neurotic recoils from his tasks, becomes a victim of anxiety attacks, and seeks to be consoled by his mother, in other words, when the Oedipus complex is being actualized, the feeling of guilt comes into play not because he loves his mother, but because he does not love his work. I cannot accept the Freudian doctrine that the feeling of guilt in relation to sexuality has its deepest roots in the incestuous object-choice. If the Oedipus complex be taken literally, the feeling of guilt is due rather to the hostile attitude towards the father. The young neurotic, so bound to his mother that he is not comfortable at home except during his father's absence, is not rarely met with. An eleven-year-old neurotic, with asthmatic symptoms, among others, dreamed as follows: "A man stepped in through the bed-room door, held a knife in his hand and wanted to stick it into my mother. Then I dreamed that I awoke from my sleep, gripped the intruder by the wrist and tore the knife out of his hand." This dream, which, incidentally, ought to be of interest to those who doubt the Oedipus theory and the doctrine of sexual symbolisms, hardly requires interpretation. I do not propose to analyze it at present. From the patient's father I obtained subsequently an excellent substantiation of the analysis of this dream. The young boy had been to the theatre with his parents the previous evening. When they returned home the parents sat up and engaged in conversation while the boy was sent to bed. Excited by the evening's entertainment, the boy retired most unwillingly. Looking now merely at the objective side of the dream, it is very plain to me that the feeling of guilt must be traceable here to the boy's jealousy of his father. Subjectively the man in the dream represents egoism. The feeling of guilt which stands back of the neurotic's fear is never due to love, but to the absence of love; *it is due not to what the neurotic does, but rather to what he fails to do*. The sins of omission are

the worst. It is psychologically very appropriate that in Ola Hansson's *Ung Ofegs visor* (The Songs of Young Ofeg), the worst fate overtakes the man who keeps silent.

I want to quote one more example to illustrate the role which sexuality, and particularly masturbation, may play in neurosis. A few years ago I treated a 30-year-old patient who suffered from agoraphobia. When he was at his worst, he had no sexual interest, felt no trace of joy in his work, but instead was subject to depression, apathy and fatigue. After a time his condition improved somewhat. The first sign of that was that he began to masturbate. At the same time his interest in work returned. Then he began indulging in sexual relations. (He was a Don Juan, a sexual type which is distinctly neurotic). Simultaneously his zest in his daily occupations became strong or as strong as it could be in a man of his type. If after a while he became worse again, his pleasure in work also decreased; he began to masturbate again and after a time fell once more into a deep depression during which his interest in work and his sexual cravings alike were at the lowest level. During the upward swing of the curve the onset of masturbation was a symptom of improvement and during the downward course of his condition it was a symptom of neurosis. In fact, all symptoms are in a certain sense a sign of unconscious progressiveness (i. e., anagogic translation of Freud's "libido"). Freud calls them substitutes. They are, so to speak, a less laborious, more easily attainable form of the gratification of the pleasure in life than sensible forms of work. In the truest sense the patient wants to have

his symptoms, although he does not understand this. There is therefore sense in the advice often given to the neurotic that he ought to learn to put up with his symptoms. Unfortunately this advice is of little use to him because he does not acquire at the same time an insight into the mechanisms of a neurosis. When, in the case cited above, cohabitation displaced masturbation, the latter was really a surrogate, a sign of diminished craving. But we must not forget that it stands also for the only possible outlet for progression available to the patient. The most serious cases of neurosis are those which show a scant formation of symptoms, which are characterized by apathy rather than by anxiety, and in which the subjects cling almost with the stubbornness of the insane to the idea that they are ill.

The case mentioned above illustrates also very clearly the psychic parallels between sexual craving and pleasure in work. In fact, the neurotic assumes towards all life problems in general precisely the same inhibited attitude which he displays towards his sexual life. For the present I wish to point out that the sexual neurasthenic who feels such deep regrets over his masturbation often lacks similar compunctions with regard to loose morals otherwise, and that in spite of orthodox views—this being further proof that the neurotic reaction against sexuality has little to do with morals in the deeper sense.

That moral fanaticism is a pure neurosis and nothing more need hardly be specially emphasized in this connection. A 22 year-old girl suffering from hysteria and phobias once complained in the course of her analysis that she awoke that morning with a very peculiar feel-

ing: she felt little pleasure in work. She thought it was on account of an unpleasant dream she had had. The dream was as follows:

"I was at home,—it was late at night. I went to bed. After a while my betrothed came into the room. He was undressed as he approached my bed. At first I was horrified and uneasy, but presently I felt a most pleasant sensation, such as I have never experienced in reality. I was not ashamed that he had come to me; I seemed to take it quite naturally. Then mother came in. At once my betrothed disappeared; she began busying herself in my room. I could not understand why she did not go away. I waited impatiently for her to go so that my betrothed might return, but she stayed."

This is a good example of how one may understand one's dreams. As might be expected, she attributed her dysphoric feelings to the erotic element in the dream. As a matter of fact, the dream mother stood for moral fanaticism. Concerning her mother the patient related that she was a very nervous person, very critical in her judgments of others and particularly severe in her criticism of the liberties men took. "Whenever mother speaks that way, I feel precisely as she does," added the girl. She herself had expressed herself on various occasions with the utmost disgust and indignation about all who are morally impure. The account she gave of her betrothed corresponded with his characteristics as she had described them on the previous day to the analyst. He represents the analysis,—subjectively he stands for her progressive self. Her own and her mother's moral fanaticism becomes—the neurosis, the resistance

against the analysis (The freedom of men—the candor of the analyst). The dream arose out of the struggle she passed through in the course of the previous day's analysis when she tried to overcome her aversion and to express herself frankly,—an aversion which, according to her own statement, rested on pretended bashfulness. The unpleasant feelings which followed the dream were due, therefore, not to the appearance of the betrothed in the dream, as she thought, but to the fact that he disappeared and that the mother failed to do so. Such a dream is very characteristic of a young hysterical girl who had been subjected to a wrong educational system.

Some time ago I treated a 40-year-old bachelor suffering from impotentia coeundi. After a couple of months he broke off the treatment under some pretext or other. I had therefore no opportunity to finish the work I had begun and therapeutically I could obtain but a partial result. But the case is interesting nevertheless and not least so from the anagöic standpoint. Like many others suffering from the same trouble, he thought that in other respects he was quite normal. But a sexual impotence of this character is unthinkable without a corresponding disturbance of one's attitude towards life in general. It actually turned out that not infrequently he suffered from marked depression, dislike for work and mental indolence. He was bashful and timid, and in his social relations he described himself as one who is not easily drawn into conversation. This attitude of his determined his relations to women as well as to his work. At the age of 21 he acquired gonorrhea; because of this he was dis-

gusted with coitus and lived abstinently for years, during which time he "repressed all feelings". He succeeded very well in this and the result was—impotence, eventually *ejaculatio precox*. During the first analysis he invented the cryptolalic expression "Krusamynta." To the term "krusa" ("ruffle") he associated "ruffled collars, such as priests wore formerly around their necks." In a moving picture play about Joan of Arc, priests wearing such collars were represented as sitting in judgment on her. The priests were goaded by the English (who, in his mind, stand for puritanism, public opinion—which condemns sexuality). The priest, therefore, stands for the neurosis. To "kru" he associated "kruka", i. e., fear. To "Samynta", the Samoan Islands, "famous for their fertility." Accordingly "Krusamynta" means: "I fear and condemn sexuality because of public opinion." Incidentally I may draw attention to the fact that *kryptolalia* is one of the best means whereby to convince one of the existence of unconscious mental processes. Nothing proves it more convincingly *ad oculos*, as it were. (Cf. O. Pfister, *Kryptolatie, Kryptographie*, etc., in *Jahrb. f. Psa.*, vol. V.)

The patient above mentioned has had a number of interesting cryptolalias. "Brunevarepar", literally translated, "en brun Eva repararer impotensen" (a brown Eva repairs impotence). He liked brunettes. In the word "Kraverisam", there were fused the word "krav" (demand) and parts of the words *Eremit*, *ensam* (lonely), *venereal*, *isolate*, *erotism* and *samlag* (coitus). It meant approximately: "Life makes certain demands on bachelors."

A woman patient yielded an excellent

key to herself through the cryptolalia "Tystari"—"tysnad" (taciturnity, inadequacy, resistance). I myself once formed the cryptolalia "Allafara." The circumstances were that my wife as well as my daughter had to leave the following day on account of illness. Upon analysis I first noticed that "Allafara" is practically the same as "Alle fahren", i. e., "all travel". The word also contained the thought "Alle gefahren" (all gone), partly on account of the illness, and partly because my wife and I had been warned the same day against diphtheritic infection on the way. There was also a third thought in the word, but discretion compels me to leave it unrecorded.

To return now to the patient suffering from impotence: at the second sitting he related a dream which was to the effect that he had been called to military service and had been given a sword which was nearly broken across at the middle and was bent and uneven besides. An interesting example for any one inclined to doubt sexual symbolism! I should perhaps add that the patient was an uncultured man, who had not so much as heard the words "sexual symbol". Shortly afterwards he had the following dream:

"I enter a garden where I see an apple tree. I pick a couple of apples and put one in each coat pocket; thus it would be less noticeable than if I put both in one pocket. Later I came across the gardener or owner of the garden. I caught a glimpse of the man only as I took the apples; then he suddenly appeared quite close to me; I was surprised. I don't remember any conversation with him. But I was very anxious to hide carefully the apples which I

carried in my pockets, so that he would not see them. Subsequently I found myself in the company of a lady wearing a green shirtwaist and I kissed her. Another gentleman was present at the time. (Addendum:) I thought it strange, improper, to kiss the lady. She and I lay half stretched out on a sofa; the woman turned towards me to be kissed. The man was lying on the floor a little distance off and towards the foot of the bed and had his back towards me. I saw only his shoulders, his back and his neck. He did not see me kiss her."

This dream, as we see, falls into two parts. It is plain that the two parts are variants of the same theme. In both a forbidden act is being carried out. The first part of the dream reminds us at once of the fall in Chapter III of the First Book of Moses (*Genesis*). The dream certainly appears an excellent illustration of Freud's theory that every dream is the fulfillment of an egoistic wish. In a previous lecture I have expressed the view that the dream does not represent merely the literal fulfillment of infantile inferior wishes, but that the symbols employed are merely the form in which the language of dreams expresses our progressive striving. The apparently infantile, egoistic wish of the dream, in other words, becomes a symbol for what is deepest and best in us.

But how is it in the present instance?

According to Freud, the dream in question would be an Oedipus dream: the apple tree would be the mother, the gardener or proprietor would be the father. Undoubtedly that interpretation is correct. But we must note that the apple tree also stands for the analysis. On the previous day the thought had

occurred to the subject that the analysis will "bear fruit." It is a well-known fact that the dream material does not necessarily always reveal during the first analysis of the dream the infantile sexuality. And for therapeutic purposes the writer seldom analyzes dream material more than once. Nothing sexual came to surface in the infantile material back of this dream, but it did associatively bring into the subject's mind the recollection that as a child he had broken into orchards to steal apples when no one saw him. His father had been the superior of an estate which included orchards; he was literally, therefore, a watchman over forbidden fruit. One who always seeks to find in the analysis the current relations will necessarily inquire: what was there in the previous day which stands in parallel relation to the apple stealing in childhood? A clear sexual parallel I was unable to uncover. The previous day's analysis, which was concerned with his sexual repression, may possibly have been brought out again during the associations. But a more satisfactory explanation is found in the fact that on the previous day the patient had obtained a detailed report about his professional training course. The patient had formerly been employed in business by another man. During that time he devoted his evenings to preparatory studies which should enable him eventually to establish himself in a business of his own and this he succeeded in accomplishing. He thus worked behind the employer's back to make himself independent,—conduct which was not in the least unethical. Nevertheless it figures in the dream and in the associations. One of his associations was: "stolen fruit tastes sweetest." What

would taste sweetest to him would be to be his own master. It may be noted also that he had to struggle against a very strong distaste for work in order to accomplish the necessary preparation which enabled him to establish himself independently in business. This is shown in the dream by his compunctions against stealing and by his unpleasant surprise when he saw the gardener. The fact is also to be noted that he was unable to recall any conversation with the latter. The element of wish-fulfilment comes into play particularly at this juncture. The forbidden fruit, therefore, is not only the mother—womanhood—the sexual object, but, above all, the theme of life,—activity (work). Subjectively the forbidden fruit is naturally a libido symbol, but viewed anagogically it stands not for an inferior instinct, but for the interest in life. Objectively the gardener becomes the father, the chief, the competitor. But the objective interpretation of such an Oedipus dream is of secondary significance, even when it is anagogic; the subjective is the deeper and incomparably more significant interpretation. In the first place he himself is the gardener, i. e., his weaker, neurotic self. For who is the antagonist, the parasite in his soul, if not the neurosis, i. e., the regressive tendencies which have always handicapped his pleasure in life and in work, which, in other words, have always played the role of prohibitive influences? The gardener is the neurotic unwilling to part with his libido, the dragon of the fairy tale who guards the treasure.

I need hardly go into the second half of the dream. The woman there is an equivalent of the apple tree, her husband is the gardener. But it is plain

that what Freud calls conscience, the critical element, is represented in this dream by the gardener and the husband. In other words, they are here nothing but the regressive, repressive conscious tendencies. It is certain that dreams often show also other, entirely different, progressive, symbols for conscience. It is a very frequent occurrence that there appears in the dream someone possessing the progressive qualities which the dreamer actually lacks in his consciousness. Such a dream image represents precisely the demands of conscience, conscience in its progressive aspect,—a positive conscience, such as is always functioning in the unconscious. During analytic treatment this is often represented by the analyst or by some substitute for him. Back of the representatives of conscience there often are various persons (Freud's "Verdichtung", fusion), possibly one of the parents (usually the one of opposite sex), a teacher or some similar person. This conscience, however, is not prohibitory; it represents merely what the subject has failed to do. I recall a dream in which the subject found himself standing before a semi-circle of judges. The latter represented the progressive demands. They were various editions of the subject's progressive self. Freud states, very properly, that when many persons, ultimately "the whole family", appear in the dream, it signifies a great secret. Many persons will stand for a great interest. By the appearance of numerous persons the dream attempts to bring into sharp outline the most sensitive element of conscience.

The more terrifying our life tasks appear, the more uncanny are the forms under which they are symbolized in the

dream. The monster in the dream, e. g., a snake, certainly represents sexuality, but not sin; on the contrary, it stands for the progressive tendencies. But Freud's contention that the unconscious transposes plus and minus contains a deep truth and the snake may represent also sinfulness; but in that case it stands not for sexuality, but for the neurosis, apprehension. It becomes what Jung calls a negative phallus symbol.

I recall a dream which a 22-year-old anxiety hysteric reported at the beginning of his psychoanalytic treatment. He dreamed that he was standing on the top of a church steeple and that a snake crawled up and curled around him. It does not require much analytic experience to see in such a dream the expression of strong recessive tendencies. He had a great dislike for work. The snake was the analysis, activity, etc. The snake, he said, was something unpleasant, cunning. It crept noiselessly upon its victim. He was unable to protect himself against the snake and was helpless in its presence. He had discovered that analysis was a cunning and uncanny procedure; he had actually felt himself helpless before the analyst "who can get anything out of one at will." His associations brought forth also the thought of ghosts which scared him; it seemed to him that there was something mystical about psychoanalysis. Another association was as follows: "When I was 12 years old, a boy lay on me, held my arms and legs tight and tickled me; it was very unpleasant." This scene represented his feeling of helplessness in the presence of analysis. The infantile admixture of anxiety and delight, uneasiness and pleasure, which he experienced when he was tickled was an appropriate

expression for his attitude towards the latter. The homosexual admixture appears here in its actual setting. (Another neurotic recalled associatively, in some connection or other, homosexuality which he regarded as a detestable vice. That was also his feeling-attitude towards the analysis and towards work). It is noteworthy that analysis, though centered on the actual situation, does not by any means overlook the infantile sexual roots. But it endeavors to determine what the infantile reminiscences now signify rather than what meaning they had formerly. Such an association as the last mentioned, for instance, shows that during the previous day the patient had found himself in an infantile situation. We see also how positive transferences have their beginning. The rest of the latent dream material disclosed only a negative attitude.

I have mentioned already that the dream of apple-stealing mentioned above recalled associatively the Biblical fall into sin. It is, as is well known, a psychoanalytic theory that our unconscious contains archaic material and that our dreams often correspond most surprisingly to the aboriginal myths and legends (the latter pointed out first by Jung). But to me it has been clear for a long time, long even before I obtained the dream of apple-stealing, that sexuality has a wholly different meaning, at least in the dreams of my patients, than it appears to have in the story of the fall of man.

As I have already mentioned, I find almost always that sexuality symbolizes the task of living. The fall of man has always seemed to me very obscure from the psychoanalytic standpoint. It fits splendidly into Freud's theories, with his

morality versus sexuality principle and, as is well known, Freud looks upon the lost paradise as representing the lost and innocent childhood, that period in which the parents have not yet interfered with the child's sexual life.

But how does the fall of man fit in with the anagogic standpoint? If sexuality represents the life problems, God must represent the inferior, or in psychoanalytic language, the regressive element. Would it not be a sign of a blasphemous fantasy to make Satan, the snake, represent the good, and God the symbol for evil? Indeed, the idea is not a novel one. I need only call to mind the myths of Lucifer and Prometheus. But another and more important consideration rests for me in the fact that in the course of analysis nearly always I find that the religious represents the progressive element regardless of the subject's personal convictions. And this is of course perfectly natural for unconsciously, if not consciously, we aim to enjoy the whole of life, irrespective of the considerations of the cold logic which tells us that life is not worth while. Jung very properly says that the rationalism of modern life has driven the irrational into the unconscious. The will to live regardless of all logical considerations bears a certain resemblance to religious faith, which means the blind acceptance of something. I always say to my patients: "You know that deeply within yourself you have the will to live. Your constant depression and your despondency are therefore contrary to your real will." If therefore the neurotic lacks the ability to accept his own will to live, if he opposes himself to the world instead of feeling he himself is a part of it, in other words, if he lacks

so-called belief in life, which is the essential element in all forms of religion, it is evident that the religion is well adapted to represent the unconscious progressiveness. Nevertheless I hold that in the fall of man God represents our neurotic, life-denying tendencies. And as a matter of fact the God in the Old Testament stands above all for the strict disciplinarian, the representative of the "thou shalt not" principle, in contrast to Christ, the representative of the principle "thou shalt love."

A psychoanalyst of the Freudian school, Dr. Ludwig Lewy, pointed out in a very valuable essay on *Sexualsymbolik in der biblischen Paradiesgeschichte* (Sexual Symbolism in the Biblical Story of Paradise) that in the older religions divine service, with its invocations to fertility, phallic worship, etc., degenerated into sexual orgies. The religious believers, in other words, took the symbols literally. The Jewish religion represented a reaction against that tendency. But it is noteworthy that in our own age persons make use in their dreams of the same symbolisms which were utilized in the older religions. Even in such a dream as the one about the stolen apples, where it seems that the sexual represents something inferior, a more thorough analysis shows that precisely the contrary is the case.

Very characteristic of the author of Genesis is the divine punishment for the sinful transgression. The punishment is work, which thus becomes a burden, an evil. Indeed, precisely that is the light in which the neurotic looks upon work. It is true, indeed, that there are neurotics who work fairly well, but at best work is a burden to them. Owing to his fear of exertion the neurotic ab-

stains from work as well as from sexuality and from all other things dangerous to life. There are sexual neurotics who speak of the evil effects of work with the same feeling-attitude which they display towards the alleged evil consequences of masturbation. The neurotic divides his life problems into two categories between which he draws a sharp dividing line. One is the realm of duty and that he conceives as something horrible, or at least, tedious. The other is the world of eroticism, of pleasure, etc. One of the fundamental characteristics of neurosis is the sharp contrast between duty and pleasure. One is reminded of the story of the old Major who with bitter self-irony summarized the experiences of his whole life as follows: "Everything that is good is harmful and everything that is pleasurable is sinful." The neurotic certainly is unaware that in his dreams the same symbols represent duty as well as his so-called gratifications. He does not appreciate the fact that work, sociability, pleasure, in other words, the common tasks of daily existence, are but different objectives of the same life ideal (or interest). Naturally he is even farther from perceiving that activity (or work) is the only objective in life capable of yielding lasting gratification, and that in the absence of work all other objectives are but surrogates. Because duty, activity, is hateful, spiritual health

also becomes hateful. It is very common for the neurotic to see in health something trivial and prosaic. The identification of health with mental inferiority is also not uncommon. The healthy are weak-minded, the neurotic is made of better stuff. A patient once said to me: "Average folks who are energetic often do better than intelligent persons who are lazy." He himself was a type of the intellectual indolent; in his opinion all healthy, active people were a pack of idiots. Some neurotics are ashamed of their virtues and pride themselves on their shortcomings. It is also characteristic of many of these patients that they are unable to enjoy vacations. One who finds no gratification in work is also unable to experience any joy in leisure. I remember a patient with whom the first signs of improvement showed themselves in the ability to enjoy leisure. One's attitude towards amusements and towards the use of leisure time is often an excellent index to mental health. Ferenczi, one of Freud's most prominent followers, very properly speaks of "Sunday neuroses." The neurotic suffers from an unhealthy craving for freedom. The whole problem of freedom ceases to exist for him from the moment he learns to recognize that in his innermost self he is really unwilling to be free.

[Translated by Dr. J. S. Van Teslaar]

Depressions, Their Nature and Treatment

By DR. WILHELM STEKEL, Vienna

Depression is one of the commonest neuroses demanding the practicing physician's attention. He sees them in their earliest stages when a rational therapy can still accomplish a good deal. The longer a person is depressed the more difficult it is to treat him successfully. Physical and medical remedies fail utterly. There is but one method of treatment available: psycho-therapy. A psychic malady—and every variety of depression is a psychic malady—can be treated only psychically.

Ere one can treat such a condition one must understand it. Nothing challenges the psycho-therapist's shrewdness and skill so much as depression. For these patients belong to the class of persons who do not know why they are sad. It is customary for them to take up the first hours of their treatment with protesting that they know no cause for being sad.

But there is no groundless depression. It is the psycho-therapist's task to discover the hidden cause for the patient's grief.

The mild forms of temporary depression, the fugitive attacks of "the blues," which come over some people even when they are apparently in the best of health, furnish the transition to those severe cases of depression which may terminate

in a psychosis, melancholia. The diagnosis of depression is easily made: the patient is dejected and can assign no reason for being so. A motivated grief is not depression in the neurotic sense. Frequently, it is true, patients present us with motives which are easily recognizable as "substitute-ideas." If during the war a multi-millionaire became afflicted with a fear of poverty and attributed his depression to this fear, even the beginner in psychotherapeutics could prove that this fear and dejection were not justified.

The characteristic feature of every true depression is the circumstance that the true cause of the grief is unknown to the invalid. He dodges the truth. There is something he does not want to see and "rationalizes" his grief or he refuses to know why he is sad. This is true even of the worst cases of melancholia. (Cf. what I say about melancholia in my book on nervous anxiety states, *Nervöse Angstzustände*, 2d ed.)

The transition to these difficult cases is offered us by the causeless dejection of normal individuals and neurotics. In such cases analysis easily demonstrates associations which will account for these depressions.

A public official complains of becoming badly depressed on certain days without being able to discover a cause for them. I ask him to come to me on

such a day. He complies with my request and presents a pitiful looking spectacle as he enters. His face, which is usually smooth and beaming, now is very solemn and full of deep lines. How long has he been depressed? Since he awoke. Was he in good spirits yesterday? Yes, in the very best of spirits. Now I begin my investigation. There is no actual occasion for grief. In such cases it is well to remember that neurotics have a "secret calendar" and are in the habit of celebrating their griefs and penitential days by being depressed and without accounting to themselves for their condition. I look on the calendar; it is May 17. I ask him whether this day has any particular meaning for him. At first he says no and then he strikes his forehead. Of course! It is the anniversary of his father's death,—something he had completely forgotten. This day has painful memories for him. He was eleven years old when his father died. He remembers that he was a bad boy that day, did not cry, made a noise, thumped on the piano, and his governess told him she had never seen such a heartless child. His depression is explicable as an instance of the frequent phenomenon known as "compensatory (or deferred) grief."

It turned out that his other "causeless" depressions were also attributable to his secret calendar. He mourned on the anniversary of the deaths of his mother and his sisters and brothers (of whom there were seven). In consequence of these deaths he had inherited a large fortune. He had every reason for compensating for his secret malevolence and satisfaction at the deaths of

his brothers; the penitential days manifested his guilty conscience.

Other temporary daily depressions are similarly motivated. In an essay on "Sunday Neuroses" (in the *Internat. Zeitschr. f. Psch.*, 1919) Dr. Ferenczi of Puda-Pesth, attributed these neuroses to sexual memories. A Jewish patient had been in the habit of furtively observing his parents in coitu on the Sabbath eve. Recollections of that made his Sundays a day of suffering for him. Another patient of his had been petted by his mother on Sundays. In a discussion of Ferenczi's thesis (in the *Zeitsch. f. Sexualwiss.*, 1919; cf. *Psyche and Eros*, vol. 2, No. 3.), I attributed these Sunday neuroses to non-employment on the day of rest. I say there:

"To be nervous means: to refuse to see something! Nervousness is a curtailing of one's mental field of vision! All neurotics employ their work as a distraction. Where work fails to do this, neurotic symptoms are utilized as distraction, excitements are created, and conflicts are initiated. So, for example, numberless neurotics used the war as a means of distraction and devoted themselves feverishly to the study of the military bulletins. Others employ politics, religion, art, or love for this purpose.) Even obsessive ideas, doubts and apprehensions serve this "not-wanting-to-see," create actual difficulties and serve to while away empty hours. Work is the greatest blessing. Those who are fanatics on the subject of work are very often neurotics who are constantly imposing tasks on themselves so as not to leave themselves a minute for thinking. They work even while they are riding from place to place, work till all hours

of the night, never get done with their work, and yet are forever taking on new burdens. It is the Sunday and the vacation period that distinguishes these fanatics from normal persons. A healthy being relaxes on Sunday, can bear to be alone, can account to himself for the matters that came up during the week, can spend the day without doing anything, and enjoys the laziness that he has earned by a week's hard work. The neurotic fanatic makes his Sunday rest a hard day's work. He makes long trips and is continually studying the map or the prescribed route. He must have company, something to divert his attention from himself, and is ever imposing such tasks on himself as will involve a great rush and excitement at the end.

The many, discontented, unhappy, disappointed, embittered and outraged persons who have not renounced their great plans and grand dreams, the seekers after love who have not yet found their complement or who have bound themselves unfortunately,—and who, be it noted well, will not acknowledge their failure even to themselves—all these feel miserable, tired and tense during every lull in their work on their Sundays, holidays and vacations, and wage a violent conflict with their "buried desires" which are surging up towards consciousness. Their headache is always the sequel to such a suppression of their own thoughts. In the same category we include the long Sunday sleep which spins out our dreams to an excessive extent, affords them much time to develop, and permits them to penetrate our waking thoughts and have a determining influence on the mood of the day."

Thoughts of guilt torture the neurotic

on Sunday; he is harassed by recollections of his secret sins. In all cases of temporary depression the analyst must search for the patient's "secret calendar."

Very often there are other associations. A man who is suffering from an ostensibly causeless dejection has seen his first wife from whom he was divorced. The title of a book ("Letters he did not get") reminds his Unconscious that a few weeks ago a lady whom he was wooing had returned his letters unopened. Or, a very elegant lady had, by virtue of a certain resemblance, awakened in him memories of a painful romantic experience he had gone through some years ago. A peculiar perfume can bring certain repressed images into the foreconscious,—odors easily awaken associations. (Grillparzer describes, in his diary, such a psychogenetic depression.) A student was suddenly plunged into depression on smelling the oil of pine which reminded him of a pine forest for which he was longing as an escape from the noise and tumult of the city. Music is the most important cause for depressions. Many persons know this. A song awakens memories and longings for unfulfilled desires. Often we hear melodies and are depressed by them, although we do not even know them. A lady, hungry for love, heard the melody of the song "Only a Dream of Happiness" and became depressed. The words of the song, she said, she did not know. She could only hum the tune. But I forced from her an admission that she had often heard the song and had also sung the words.

Over and over again analysis proves that there are no unmotivated depressions. This is as true of the mild and temporary depressions of the normal as

of the suicidal despair of the melancholic.

The change from melancholia to mania, from grief to joy, from despair to exuberance, from depression to meriment, must have tempted many physicians to conceive these pictures from one viewpoint. This originated the idea of "manic depressive insanity" and "cyclothymia". In actual practice it cannot be confirmed that every melancholia is the depressive stage of a manic depressive insanity. The physician sees often enough cases of pure melancholia without a manic reaction and manics who have not passed through a stage of depression.

But, notwithstanding this, it cannot be denied that depression does observe a certain periodicity. There are depressions that recur at regular intervals. Many women get depressed before and after their menses. Even the so-called "daily depression" shows a decidedly periodic character. There are persons who are depressed for several hours after waking. A patient describes his condition thus: In the morning I feel as if someone had tied a bag over my head. This lasts till ten o'clock, then I begin to feel better, and the bag is slowly lifted off. In the evening I am quite well and nobody would believe I had ever been depressed.

This morning depression proves to be the aftermath of a dream. If we investigate these dreams we find that in his dream images the patient had been revelling in a world of illusions and fulfillments from which he had been snatched by his awaking and been made to realize the difference between fantasy (dream) and reality as well as the unbearableness of reality. These dreamers, who also

love to indulge in day dreams and like to lie in bed long in the morning and dose away the time, *i. e.*, to indulge in fantasies, all suffer from morning depression. But there are persons who get their daily depression at various hours of the day. Women who can afford to do so lock themselves up in their rooms at such a time and will not see anyone until they feel better. Most of them behave somewhat as follows: the depression is at its height in the morning; during the day their mood improves and in the evening and at night the patients feel well. These persons are disposed to sleep late in the morning and to stay up till late at night or the early hours of the morning. But in this they are deceiving themselves, for the depression does not keep away though they do not rise till 12 M. They have only changed the rhythm of the depression.

Quite frequently we are told that the depression occurs every other day. A bad day follows a good day, as the Amen follows a prayer. The patients cannot be talked out of this idea. If they have a good day today, they are sure that tomorrow will be a bad one. In this neurosis *the consciousness of guilt* plays an important role. Autosuggestion begets a bad day because the patient confidently expects one. Behind this anticipation lurks a guilty conscience. They don't deserve to feel well, they think. They are the thralls of "sinful ideas" which are usually unconscious and only in the rarest instances clearly known.

A man, aet. 31, consulted me because of depressions which occurred every second day. On the well days he was intensely libidinous and could not resist his paraphilic (perverse) tendency which consists of a passion for "well-developed

girls between the ages of 10 and 13. On these days he frequented parks and playgrounds for children and entered into conversation with such girls and gave them candies, etc. (All "lovers of children" whose pockets contain sweets for children should be suspected of paedophilia! Children should be guarded against such lovers of children, even if these happen to be "nice old gentlemen." It is especially in the senium that a pathological paedophilia manifests itself as a regression to the infantile.) On his well days he used to take girls to hotels. He contented himself with watching them undress but never attempted coitus. They were always "respectable girls" whom he had promised not to touch or deprive of their virginity. This moral reserve was only a rationalization of his paraphilia. He confessed to me that, because of inner resistance, he could not complete a coitus even cum puella publica. He contented himself with the disrobing et cum titillatione genitalium. He always had a child before his mind's eye and in the presence of adults, always of an infantile type, he always acted as if they were children The depression on the following day was his punishment for his libertinage on the preceding day. At the same time it also represents his despair at not being able to gratify his craving.

All depression is a moral reaction to immoral desires and witnesses the hopelessness of the secret sexual strivings.

This alternation between erotic excitement and sexual apathy can be demonstrated in every case of periodic depression, in all cyclothymias. This probably plays an important role in the psy-

chogenesis and co-operates with a second factor which I shall mention later.

A girl gets sick with intense depression every few months. During her well periods she is erotomaniac. She speaks only of love, masturbates several times daily, and flirts with all the men she comes in contact with. During her depression she is wholly anerotic, is disgusted with everything sexual, is very pious, goes to church, castigates herself, tries to be patient, though she finds that very difficult. At times she goes into rages during which she menaces all who come in contact with her, especially her mother. The latter is charged with being the cause of the patient's troubles. These periodic depressions followed a disappointing love affair which did not seem to affect the girl particularly. She had been engaged to be married and loved the young man "more than all the world." There were all sorts of intimacies between them, but she would not submit to coitus. Her betrothal had the effect, however, of making her a perfect demi-verge. Suddenly her fiance demanded that her dowry be doubled; her parents indignantly resented the insult and the young man broke the engagement. (She was an only child of wealthy parents and would have received a magnificent dowry.) But the young man had made the acquaintance of a wealthier girl and was anxious to terminate the relationship with his betrothed. Her parents had acted quite properly, for the young man was thoroughly sordid and wanted their daughter only for her money. But she resented her parents' action. Her sexuality had been fearfully aroused and she was convinced she could never belong to an-

other man, that she could never again feel herself pure. How did she deport herself after the termination of her betrothal? She seemed to be very happy, laughed all day long, visited all her friends, and everybody thought she had not a care in the world and was supremely happy. But there was something forced, something artificial, something of a manic nature about her gaiety. The depression set in only half a year later, apparently after an attack of influenza. She was too proud to show her great affection for the man. She concealed this love behind a mask of heightened gaiety and coquetry. In her depression she rationalized her dejection with all sorts of ridiculous motives, *e. g.*, she was becoming too fat, she was too plump and ugly, she will never be married, etc. She wanted to go into a convent and become a nun. This condition lasted a few weeks and was followed by a period of manic excitement with heightened erotism. The hopelessness of her love for her ex-fiance came to her consciousness in a disguised form in her periods of depression. Her depression took the shape of "I shall never, never get him!" Her depression and her attacks of rage also manifested her recollections of the young man. An attack of depression would occur if she happened to read in a newspaper the name of some one in her betrothed's regiment. When she read of his marriage she became depressed after a short period of apparent happiness. This attack was very severe and lasted many months. Treatment in a sanitarium had only made her condition much worse. Then she attempted suicide on two separate occasions, after which she was brought to me. Pedagogic psychoanalysis accomplished a com-

plete cure. After four months of treatment she returned to the parental roof, was soon married and is now the happy and healthy mother of two children. The puerperium was uneventful. Her recovery is complete. She has found a perfectly healthy and potent husband who worships her. Her fears that she could not be faithful to any man, that she would need half a dozen men, proved groundless. These compulsive fears were nothing but the reaction to her fearful disappointment and a flight from psychic love to corporeal intoxication.

But let us revert to the subject of the periodicity of depression. There are depressions that recur monthly and that recur only in certain months of the year. Some persons get depressed in the spring, some in the autumn. Goethe, as we know, suffered from depression at the end of autumn and the beginning of winter.

Moebius reports that Goethe suffered from intense depression for several weeks before his death. Moebius was also able to show that Goethe's love-life observed a seven-year periodicity and that in these periods his depressions were bound up with a new love affair and a renewal of his creative urge. He paid for this creativeness with more or less intense depression. His physician (Dr. Vogel) reports: "If Goethe boasted of his productivity it always worried me because an increase in mental productivity always ended in a pathological affection of his productive organs. This was such a well-established rule with him that at the beginning of my acquaintance with him his son called my attention to the fact that, as long as he could remember, a prolonged period of mental work was invariably followed by a serious illness."

Goethe himself called this condition his recurring puberty and realized the sexual nature of these periods. To Eckermann he said: "Such men are geniuses. Theirs is a peculiar nature; they experience a recurring puberty, whereas others are young only once."

A very interesting and serious type of depression is presented by the following case from my own practice.

A girl, aet. 32, has been suffering for three years from depressions which begin in the spring and whose first symptoms are loss of appetite and great loss of weight. During the entire period of dejection she is anything but silent or negativistic. On the contrary! She is characterized by a mild maniacal restlessness. Her sleep is disturbed; she cannot be quiet; runs around a good deal; visits one relative after another; cannot stay long in any one place; eats almost nothing all day; is disgusted with meat and eats only vegetables. A considerable sojourn in a sanitarium, a change of climate, forced feeding, massages, etc., did her no good.

The psychological exploration of the case revealed a remarkable genesis. Three years ago she had paid her brother-in-law a visit in the country and had been his guest for a considerable period. Then they travelled to Vienna together in the company of his eight-year-old child. After a long search they found a hotel in which they could get a room, but there was only one room for the three. Joking about her marriage-bed she went to sleep in one of the two beds with which the room was provided. She was innocent of any knowledge of sexual matters; had no idea of sexual

relationship and still believed that children were begotten by some sort of external manipulations. At least, that is what she said. That particular night she could not sleep. Towards morning, about four o'clock, her brother-in-law asked her why she wasn't sleeping. He got into her bed, began to speak to her about sexual matters to which she listened curiously and gladly. At the same time he pressed the phallus into her hand, a procedure which excited her intensely. Then he offered to demonstrate to her what coitus was like and not to hurt her. As might be expected, he deflowered her. Next day she was in despair. It required all the persuasion her brother-in-law was capable of to keep her from telling the whole story to her parents. He talked of love to her although, as was proved subsequently, he had absolutely no love for her. (The girl was neither charming nor desirable; she was rather ugly, thin and unsociable.) She conceived the notion that he would divorce her sister and marry her. She dwelt on fantasies of what would follow if her sister died. Wishes for her sister's death usurped her fantasy.

Such wishes for someone's death play a large role in the psychogenesis of depression and account for the sense of guilt from which many victims of depression suffer. They charge themselves with all sorts of crimes which had never been more than thoughts.

Her first attack of depression followed the above traumatic experience, and her subsequent attacks recurred with mathematical precision on the anniversaries of her defloration. She counted the days till when her brother-in-law would take her and rehabilitate her. But she is

daily growing older. This unpleasant fact she annuls by a forced youthfulness during her depression. She wears short dresses, braids her hair like a young girl, speaks and acts childishly.

When winter comes she conquers her depression and hopes her secret wishes will be fulfilled the following spring. At such a time she resumes the habit of onanism.

Over and over we see that depression sets in with the cessation of onanism. Invalids who masturbate are extremely rare. Ceasing to masturbate intensifies the depression. Abstinence from onanism often causes depression. And in such cases physicians often turn things around and say that the depression was the sequel to onanism instead of the sequel to abstinence. (See my book on "onanism and homosexuality," of which a translation into English is in preparation.)

In our patient's case the loss of virginity must also be taken into consideration. "You may marry no one but your brother-in-law!" This imperative makes her situation so hopeless that she cannot help getting depressed.

Depression signifies hopelessness and renunciation of one's secret sexual aims and desires.

This sexual hopelessness allies itself with a tortured ambition and a sensitive depreciation of the feeling of personality. That is why depressions occur so frequently among officials and officers who are superseded in office by others and teachers, etc., who are retired on pensions. In all these cases the motive for the depression is disguised, for the sense of personality resents acknowledging the

true cause. They all pretend to be satisfied with the way their affairs have gone. Now at last they have the rest, etc., that they had been longing for. Thus they allow themselves a latency period for the outbreak of a manifest depression which is then attributed to other causes or regarded as an unmotivated dejection.

But a person will rarely become afflicted with a grave depression unless the hopelessness of his sexual desires hinders the transformation of ambition into love.

An excellent example is furnished us by the following case which also gives us a profounder insight into the essence of depression.

A man of 59, holding a very prominent position, has been suffering from depression for two years. He had to take a hypnotic and a laxative daily and does not dare to go out of the house because he is suffering from a "weak heart." He has arteriosclerosis. He is quite sure that he will have a stroke of apoplexy soon. In fact, he is already paralytic. His memory is gone, he cannot read, and has no interest in worldly affairs. He was infected with syphilis fifteen years ago. The Wassermann test is always negative.

The treatment of such a patient is always an extremely difficult matter. They will not show their cards and are psychically almost inaccessible. They keep on lamenting and bemoaning their fate, and speak of nothing but their sufferings. No other human being is so weak as they. Life is unbearable. If they had the courage they would have ended it all long ago. The best thing

the physician could do would be to give them a good dose of poison or tell them what to take. Some are angry if the physician does not instruct them how to terminate their lives.

All of them emphasize the hopelessness and the incurableness of their malady. All have given up hope. All smile know-

ingly when the physician speaks of curing them. They all have a strong "will to be sick", i. e., they do not wish to get well. They are distracted souls consisting of two or three personalities.

*[To be continued.—Translated by
S. A. Tannenbaum.]*

The Psychology of Everyday Mistakes

By SAMUEL A. TANNENBAUM, M.D., *New York*

[Continued from 3:320]

VII.

Without a statistical study of the subject, if that were worth while, it is impossible to say just what variety of *slips of the tongue* occurs most frequently. Professor Freud tells us (p. 17) that "the most frequent cases are those in which instead of a certain word one says another which resembles it." But lower down on the same page "the most common" slip is "that of saying the exact opposite of what one meant to say." And on p. 49 we are told that "the most frequent and most trifling cases of slips consist in the contractions and fore-soundings which show themselves in inconspicuous parts of speech." We shall not take it upon ourself to decide this difficult problem, especially as there are no available data on the subject.

Example 10.—Mr. C. is overcome by a desire to see a baseball game; knowing that his employer would not permit him to take the afternoon off for such a purpose, he decides to feign illness. The employer enters the office and is greeted by Mr. C. with the following words: "I'll have to take the afternoon off,—I am not sick—not well." The explanation is obvious: Mr. C. was in doubt whether to say "I am not well" or "I am sick";

"sick" is a more emphatic word than "well," *i.e.*, richer in affective associations. The momentary doubt and the necessity for speaking right on cause an interference in psychic functioning by virtue of which the more emphatic word is given utterance to. That the slip happens to make sense and happens to betray the truth are purely accidental. Very often such slips do neither, especially when a person is in doubt about a matter that may have purely literary or linguistic or rhetorical significance. What happens in these cases is probably somewhat as follows: as soon as a word comes to mind the nerve paths leading from the neurogram representing that word in the brain are opened for the transmission of the nerve impulses to the vocal organs; unless these pathways are definitely shut off before the individual has decided to say something else, some of the nerve force escapes by the partly open nerve paths and innervates the vocal musculature. It is on this psycho-physical basis that we should explain such errors as the above, as well as numerous, if not all, neologisms, *e.g.*, "aggravoking" for "aggravating" and "provoking", "bra-

vageous" for "brave" and "courageous", "angravates" for "angers" and "aggravates", "fuited" for "fitted" and "suited", etc.

Such self-betrays as Mr. C.'s saying "I am not sick" when he meant to deceive his employer are responsible for the frequent psycho-analytic assertion that "the Unconscious never lies, the Unconscious is always truthful." Freud goes so far as to say that 'a person may lie with his tongue but he will betray himself with his finger tips.' No doubt this often happens; but that's exactly what we should expect to happen now and then, seeing that both the truth and the falsehood are in the mind at the same time. It may just as easily happen that the person will utter a falsehood, or what will be so regarded, when he intends to tell the truth but is undecided as to the words to employ. At any rate, Mr. C.'s slip does not at all warrant any assertion about the Unconscious, inasmuch as the lapse was brought about wholly on the conscious plane. Other errors of a similar nature may be due to an interference between a conscious idea and a subconscious one (*i.e.*, one that had been in consciousness some time prior to the lapse). Careful analyses, unbiased by preconceived theory, will show that all such lapses in speaking or writing can be explained without resorting to an hypothetical Unconscious. (Note: Throughout this essay the word "subconscious" is not to be identified with Freud's "Unconscious" or "Foreconscious".)

Besides, if Professor Freud's theory of lapses due to unconscious causes were true and indicated the essential

"truthfulness" ("accuracy" would be a better word for it and would avoid the moral connotation) of the Unconscious, would we not have to infer that the absence of a slip or lapse is a guarantee of veracity?—and we all know that one may lie without making slips of the tongue or pen. This also raises the unanswered (and unanswerable) question why, if unconsciously we are all "truthful", we do not always lapse into the truth when we are not speaking or telling the truth.

Example 11.—Mr. S., who is suffering from an extremely puzzling and interesting psychoneurosis, consults me about his condition and we discuss the laboratory findings. His wife accidentally divulges the fact that he is being treated by a chiropractor and is "getting better". Realizing that Mr. S. will not take up analysis, I decide not to urge him to do so and close the interview with these words: "If you decide to discharge your treatment—to take up analysis, let me hear from you." What caused the lapse? Something in the Unconscious? No. I really wanted to say: "If you decide to discharge the chiropractor," but thought that would be too obvious a betrayal of my desire and decided to say instead, "If you decide to change your treatment." "Discharge" is, therefore, a fusion of "discharge" and "change", is the result of "interference" and was brought about in the psycho-physical way that I have explained under *Example 10*. Freud would say, as he says in the discussion of similar errors (p. 46), that the suppressed idea ("to discharge the chiropractor") "indemnified itself". In this kind of phraseology lies the

essential weakness of the Freudian method. Freud is the victim of his metaphors. By virtue of his propensity to personify mental processes, he finds wishes and repressions and inhibitions where a less poetically inclined scientist would see only psycho-physiological processes.

Incidentally it may be remarked that the above lapse and neologism ("discharge") might have resulted from a doubt as to whether I should use the word "discontinue" or "change" (*e. g.*, "discontinue your present treatment"), somewhat as in the lapse "bravaceous", and that only my recollection of what went on in my mind can explain how the lapse actually occurred. And yet Professor Freud presumes (p. 46) to be able to deduce from the circumstances alone intentions of which the speaker, the party making the lapse, knows nothing!

Why, it may be asked, did the suppression of my first intention "indemnify itself" by distorting the word "discharge" or "change" rather than the words "chiropractor" or "treatment"? Freud nowhere attempts to answer this question. And yet the matter seems simple enough. It was at the moment when I began to set the neuro-muscular apparatus in action which was to express the first thought ("discharge the chiropractor") that I thought of the substitute idea ("change your treatment"); in fact, the syllable "dis-" had already been pronounced when I sent the word "change" after it. By this time I had regained sufficient control of my mental and psycho-physiological processes to check the further utter-

ance of what I had decided to suppress. It was not an unconscious antipathy to the word "discharge" that made the attempted suppression "indemnify" itself by compelling me to make a slip of the tongue. If we search long enough we are sure to discover both pleasant and unpleasant associations to almost any word.

Example 12.—In telling me of her troubles with her husband, Mrs. R. quoted him as saying to her: "You don't love my mother and I won't love yours!" To which, Mrs. R. retorted: "I don't want you to love you!" I called her attention to the fact that she had misquoted herself and asked her to tell me what had been in her mind when she made the slip. "Here is what I was thinking of: I wanted to say to him, 'I don't want you to love her because she doesn't want you to love her.'" As she said this she put a strong emphasis on "you", although a good elocutionist would have put the emphasis either on "she" or on "want". The emphatic word ("you") in her mind usurped the place of the unemphatic "her" in the sentence she actually gave utterance to. This may be called an error by prolepsis or anticipation. The neuro-muscular apparatus runs ahead of the intention, owing to the greater affective endowment of the element that then finds expression. Without this explanation the above lapse has absolutely no meaning and none could be logically read into it, though, I am quite sure, that some psychoanalysts would not have questioned the patient about the slip but would have silently interpreted it as a manifestation of "transference" ("love you"!).

Incidentally it may be pointed out that very often a person feels foolish or nonplussed when he realizes he has made a slip of the tongue, as if he had given himself away, convicted himself of insincerity, of feigning a passion he did not feel, etc. The reason for this is, in all likelihood, the speaker's realization that he has not his faculties in full control and that he has betrayed this to his auditor. That is why one does not like to acknowledge having made a slip.

Slips of the tongue, I have noted, are especially apt to occur when one is telling a joke, a funny story, etc., and anticipates that the auditor will see the point before the speaker has finished the telling. In all such instances the slip anticipates the final words. There is no question of any resistance to the suppressed or omitted words or to the speech as a whole in these errors by prolepsis or ellipsis. We are impatient to finish the sentence before the auditor gets the "point" of the story, so that we may not lose the satisfaction of having surprised him.

Example 13.—Dear old Mrs. F. tells me pathetically of her troubles with her teeth and her dentist. She is doomed to suffer from indigestion for a long time because "the dentist hasn't a plate big enough—small enough—for my mouth." Her mouth is really very small. Then why did she say "big enough"? The Freudian will answer that she unconsciously wished she had a big mouth rather than a small one, so that she would be more easily fitted. But, as a matter of fact, this wish, while true, was conscious. Besides, the matter was much simpler

than this. Her mind was wholly occupied with the thought that the plates were all too big for her; in fact, she had just said so. "Bigness" and "big plates" dominated her mind. And, furthermore, to her (a German) the words "big enough" meant "my size". (Mrs. F. thinks in German and speaks English hesitatingly.) Here, then, we have an instance of a slip in which the speaker said the opposite of what she intended, but no amount of jugglery would find in it an illustration of Freud's "conflict between two irreconcilable strivings" (*l. c.*, p. 43). There is no question that some people, never such as are known to be clear thinkers, are given to saying the opposite of what they intend, *e. g.*, "isn't it cold!" for "isn't it hot!", etc. My impression is that this happens only with adjectives, as in the much-quoted slip which declared the meeting "closed" instead of "open".

Example 14.—Sometimes sound-associations may be responsible for a slip of the tongue, as in the following example. Dr. X., a prominent psychoanalyst, was addressing a meeting of a medical association, 98% of whose members are Jews. The subject of the discussion was spiritualism; the reader of the paper of the evening was a prominent Jewish psychologist. Dr. X. was the only one on the program not a Jew. To illustrate what he was trying to explain to his audience, Dr. X. spoke of "a heathen prophet" who "profitted" from his services to his flock. Suddenly the audience was startled by hearing the speaker refer to "this Hebrew prophet"! Subsequently the speaker frankly acknowl-

edged to me that his surroundings had aroused in him—consciously, of course—a “superiority-inferiority conflict” based on his English ancestry. But this would not have produced the lapse had it not been for the similarity between “profit” and “prophet” and for the fact that “heathen” and “Hebrew” begin with the same sounds. The slip was further contributed to by the fact that the speaker was still suffering from embarrassment resulting from his having tripped as he ascended the speaker’s platform. His mind not being on the *qui vive*, his associative processes led him into a lapse.

Example 15.—Even what may appear to be a very simple kind of lapse may really have a complicated determination. Thus, for example, a short time ago I chanced to be one of a party in an automobile whose engine suddenly went wrong. The chauffeur stopped in front of a farmhouse to repair the engine, but found he did not have the necessary tools. He decided to get some water for the radiator and go on; but while he was gone I noticed, with no little pleasure, an old automobile on the farm. Seeing the chauffeur returning, I called out to him: “John, here you can get a tool of kits!” Of course I meant to say a “kit of tools.” Why then did I not say so? I had really intended to tell John only that here he could “get a tool” with which to repair the engine. (Damaged engines are not conducive to comfort or safety.) But “a tool” seemed to betray an awful ignorance of tools and machinery. How cover up my ignorance? By using the non-committal and larger locu-

tion, “a kit of tools”. But as I could not unsay the word “tool” and could not say “tool kit of tools”, I jumbled it up as “tool of kits” and let it go as a slip of the tongue. Needless to say, not all errors of this type, *e. g.*, saying “the Milo of Venus”, “door the lock”, “torture of chamber”, etc., are thus determined.

Example 16.—Such a slip of the tongue as the following would be “meat” for the Freudians and positive “proof” of the reality of the Unconscious if a perfectly satisfactory explanation on the conscious plane were not forthcoming. One of my patients asked me why Mrs. L. was not coming to me for analysis. Knowing that he knew all about her marital difficulties, etc., I told him that her husband had written me that she would not be analyzed by me because her sister had been divorced from her husband after I had analyzed him. “She also knows,” I continued, “of another couple who separated after the husband had been analyzed by me; and that is why she won’t come to me for her divorce—her analysis.” The slip caused me some slight embarrassment for the moment. And now for the explanation:

Mr. L. has no love for his wife and is anxious to be rid of her, especially as he is infatuated with another woman. But his wife not only will not free him but threatens to commit suicide if he will not give up the other woman. Mr. L. is perplexed to the extreme and thoroughly cowed by his wife’s threat. She will not be analyzed in response to her husband’s request, because she knows that he hopes the analysis will make her consent to

be divorced from a husband who does not love her. Naturally, I was not in sympathy with a marriage that is dependent on threats of suicide. My slip therefore revealed what I would wish the outcome of the analysis to be. But there was nothing unconscious about it,—it was only an unintentional expression of what I felt and thought. "Repression" had absolutely nothing to do with it.

We have dealt with the subject of slips of the tongue at such length, notwithstanding Freud's concession that some of these need not have a "meaning", because he himself devotes more space to them than to the other lapses and because he more than once says (*e. g.*, *l. c.*, p. 43) that he takes "the slip of the tongue as representative of the whole species" of lapses. And, in truth, slips of the tongue are as valuable material for testing the validity of Freud's theories as any other kind of lapse. It may, of course, be objected that I have chosen only such slips as can be explained without resorting to the theory of unconscious mental operations, but, as a matter of fact, I have kept note of every variety of lapsus linguae that has come to my notice and have chosen for analysis those that seemed most difficult and most suggestive of unconscious motives. I may, on the other hand, point out that Freud and the Freudians too readily assume the operation of "unconscious" factors and make no attempt to search out the conscious and sub-conscious determinants. This is no more than what we should expect from one who insists on his ability and right to interpret lapses without

the misdoer's co-operation and even over his objections and disavowals.

Freud's "Unconscious" is speechless; words, he says (in the *Internat. Zeitschr. f. Aerztliche Psa.*, 1915, No. 5, p. 267), are imparted to ideas by the Fore-conscious. Notwithstanding this, we are asked to believe that the Unconscious takes advantage of word resemblances to express ideas of which the speaker is not only not conscious but which he repudiates when they are attributed to him. Thus, for example, Freud (*l. c.*, pp. 17, 24) quotes the slip of a professor who said in his opening lecture: "I am not *inclined* [*i. e.*, "*geneigt*" instead of "*geeignet*" (qualified)] to evaluate the merits of my predecessor" and finds in it "an open betrayal of intent in sharpest contradiction to the attempt to cope gracefully with the situation which the speaker is supposed to meet." But if this professor had been questioned, might he not have said that his slip was only an example of prolepsis, that he had intended to say: "I am not qualified, nor inclined, to evaluate", etc., and that his slip betrayed nothing he would not have frankly acknowledged? So, too, Freud quotes a gentleman who told a lady he would be glad to "inscort" (insult, escort) her. Had we questioned the gentleman we might have found a very timid and bashful young man who had intended to say that if the lady would not consider it an insult he would like to escort her; his embarrassment caused a slip by condensation. In none of the examples cited by Freud is it necessary to assume "unconscious" mental operations, especially as he does not give sufficient de-

tails concerning the circumstances in which the lapses occurred.

On page 49 (*l. c.*), discussing what he calls slips by "compensation", Freud points out that "if, for example, one pronounces a long vowel as a short . . . he will . . . soon after lengthen a short vowel and thus commit a new slip . . . In this conduct the determining factor seems to be a certain consideration for the hearer, who is not to think that it is immaterial to the speaker how he treats his mother tongue. The second, compensating distortion actually has the purpose of making the hearer conscious of the first, and of assuring him that it also did not escape the speaker." This is certainly making a mountain out of a mole-hill, or, at least, making a very simple matter into a very abstruse one. Professor Freud has evidently not noticed that such *secondary slips* (not "compensating slips") occur even if no auditor is by to hear the lapsus, *e. g.*, when one is reading to oneself. This second lapse results from the fact that the speaker's attention is attracted to the error, and that his mind dwells on it (to know why he made the slip and whether something is wrong with his faculties) while he is continuing to think (or read) and give utterance to something else. Thus:

Example 17.—While examining a patient who spoke a mixture of broken English and poor German, I inquired whether eructations, "belching", was one of his symptoms; but, noticing that he did not seem to understand the word, I said "gröptzing" (for "gröptzen", the German jargon for "belching") and hastened to correct

my slip (the English participial ending *ing* for the German *en*) and lapsed into "belchen". My mother tongue did not concern me,—it wasn't my mother tongue,—nor did I consider the patient's grammatical sensibilities.

Example 18.—Unfriendly audiences, as well as merry ones, like some psychologists we know of, are apt to find a slip of the tongue where there really is none.* One night, during a heated discussion of an unpopular proposal to repeal or modify the law against giving women information about contraception, I portrayed to the County Medical Society (which was hostile to the proposed legislation) the pitiful condition of an hysterical and melancholic young woman (the mother of an only child), the victim of coitus interruptus. Enthusiastically I went on to say: "I deemed it my duty to instruct her in the art of contraception, and now she is a happy and healthy mother." The audience saw its opportunity and did not fail to take advantage of it. It is purely a matter of accident that the imagined slip embodied a truth—the unreliability of most contraceptives.

Example 19.—Another variety of lapsus linguæ is illustrated in the following incident: A young actress, during her first season on the stage, startled her audience one night by exclaiming dramatically: "Oh! You can't tell me anything about men! Very few of them can slip through my crutches!"

*For an impressive example of the analysis of a slip which was not a slip, see Otto Rank's analysis of a (non-existent) slip in *The Merchant of Venice* and my comments thereon in *Psyche and Eros*, vol. 1, No. 1, pp. 31-33.

From the deathly silence on the stage and the guffaws from the gallery, she knew that something had happened. When the curtain was rung down she was requested to stick to the text and say "clutches". "Through my clutches" is, for her, almost as bad a combination of words for rapid utterance as "She sells sea shells on the sea shore," "Sister Susie is sewing shirts for soldiers," or "Peter Piper picked a peck of pickled peppers," etc. When one speaks more or less mechanically it is easier to say "through my crutches" than "through my clutches."

Example 20.—An interesting matter in connection with lapses which Dr. Freud has wholly overlooked is presented by the following rather complicated slip of the tongue. Miss A., contrary to her custom, had poured a few drops of cologne on her hands just before her fiance's arrival. As he entered the room he complained of a slight headache and begged to be permitted to lie down. Remembering that he disliked scents when he was not well, she apologized and made a move to go and wash her hands. He stopped her, saying affectionately: "Dear, don't go away! I really don't like it." And both laughed. His manner and the situation clearly indicated that he had intended to say "dislike". The slip did, nevertheless, happen to tell the truth: he dislikes scents, as a rule. He had really intended to say: "Dear, don't! I really don't dislike it; my head doesn't ache badly enough for me to mind it, and I love you so that I like everything about you." But then he decided to shorten his sentence,—his head ached more than he cared to ad-

mit,—and the word "like" got into the abbreviated sentence by prolepsis. If the Unconscious had caused the slip, *i. e.*, had been capable of altering the actions of the vocal apparatus so as to say "like" instead of "dislike", it should also have altered the tone of voice to harmonize with the sentence as spoken.

Observation will prove that there are many slips that have absolutely no "meaning" but result from haste, inattention, etc., and are especially liable to occur when a person is in a disturbed emotional state. Freud's fundamental assumption (not "conclusion") that the essential condition for the occurrence of a lapse is the suppression of an existing intention to say something is a fallacy based upon insufficient and inaccurate observation as well as prejudice based upon a preconceived theory.

Slips of the pen are, on the whole, so very much like slips of the tongue in their psychology that we shall say no more about them at this time except to deny Freud's statement (*l. c.*, p. 50) that if a person who is not in the habit of re-reading a letter he has written makes an exception now and then and does re-read one of his letters, he will "always have the opportunity of finding and correcting a conspicuous pen slip." "How can that be explained?" asks Freud, and he answers himself thus: "This looks as if these persons know [unconsciously?] that they had made a slip of the pen while writing the letter. Shall we really believe that such is the case?" And of course the guileless and uncritical student is expected to go away from the lecture with the

conviction that "such is the case." Most people dislike re-reading the letters they have written and re-read only such as seem to them to be of more than ordinary importance,—and they do not "always" find "a conspicuous pen slip." People usually re-read their letters to cross their *t*'s, dot the *i*'s, insert omitted words, and to repair closed loops.

A very common slip, both in writing and in speaking, consists in introducing into the text a word or part of a word that the speaker sees or the writer hears while he is speaking or writing. This may be called a *slip by intrusion*. The mechanism of its production is too obvious for further comment.

VIII.

All actions that are not carried out in accordance with the demands of the situation or in accordance with the conscious intention, Freud regards as the product of repressed (hidden and unknown) purposes which the analyst can recognize even without the misdoer's co-operation. There is, of course, no way by which the interpretation can be corroborated, for Freud insists that the misdoer's denials are entitled to no more consideration than an accused criminal's denials of guilt. (Nay, more; if the unfortunate misdoer registers "a really energetic denial" of the intention imputed to him, Freud finds therein additional proof of the correctness of his interpretation, for, says he, the accused "betrays a strong personal interest in having his slip mean nothing.") His method is, however, open to the further objection that in most instances the number of

interpretations is limited only by the ingenuity of the interpreter.

Example 21.—To illustrate this let us cite the example of Miss N. who, at 1 P. M. escorted her lover to the door and, contrary to her custom, locked the door after him, just as she does when he leaves her at midnight. How is this to be interpreted? I shall venture only four guesses. First, that she wished to be done with him. (They had been quarrelling of late.) Second, that she was tired and would have liked to go to bed. Third, that she did not expect to see him any more that day. Fourth,—subtle flattery,—that when he goes the day is over for her. Which of these interpretations is correct? None. In all probability, her mind was occupied with something unrelated to the situation as she followed him to the door and there automatically dropped the latch, as she does at night. In other words, it was a habit action which was released by the associated movements (going to the door, saying *au revoir*). In corroboration of this explanation it may be pointed out that only very rarely did she escort him to the door during the day. A contributing factor of no little importance was the fact that on this day Miss N., contrary to her usual custom, did not have her telephone book on the floor to keep the door slightly ajar. (At night he shoves the book aside and she latches the door behind him.)

Example 22.—About the same time that the lapse recorded in the previous paragraph occurred, the young man in question was guilty of the following "error": He was in the subway at Broadway and 96th Street, New

York, where he might have taken a train to his own home or to that of Miss N., at 5:40 P. M., and was of the opinion that he had time enough to take the Bronx train, spend ten minutes with Miss N., and return to his home (on the Broadway line) in time for dinner at 6:30. While he was figuring this out a train pulled into the station and he forced his way into it along with the throng. Two or three minutes later he realized that he was in a Broadway train and on his way home instead of to the Bronx:—he had failed to make sure that he was taking the right train. Freud would see in this another instance of the influence of the Unconscious and would say that the individual unconsciously did not wish to call on Miss N. It so happens that this explanation is partly correct: the man in question was, in fact, not eager to see Miss N.; they had quarrelled and he had wished to punish her by not calling on her, and he even thought that if a Broadway train came along first he would take that and not wait for the Bronx train,—in other words, he left it to chance whether he would or would not go to see Miss N.; and it was for the same reason that he did not stop to see what train he was going into. And yet he subsequently told Miss N. that he had taken the wrong train by "mistake", and thought he was telling the truth. The "error", therefore, resulted from a conflict whether he should or should not see her,—but there was nothing "unconscious" about it. Something like this is the explanation behind all errors of this type. Owing to a division between the individual's desires, he does

not exercise sufficient control over his actions to insure the carrying out of the intention which his conscience dictates. Chance is permitted to solve the conflict—always a conscious conflict!—between conscience and desire, between reason (judgment, intellect) and impulse (craving).

In analysing such erroneously carried out actions as the above, the Freudian stops his analysis when he discovers a desire ("a secondary suppressed tendency") contrary to the avowed intention and thinks that the existence of such a "tendency" is sufficient to explain the error. Notwithstanding the conscious (*i. e.*, the avowed) intention, says he, "the suppressed impulse breaks through" (Jones, *l. c.*, p. 79). The main objections to all this may be thus summarised: first, the secondary tendency is not suppressed, "unconscious"; to "suppress" something is not identical with making it "unconscious"; second, all of our actions are determined by more than one motive and we rarely do anything that does not involve the overcoming of counter-impulses, *i. e.*, desires at variance with the manifest or avowed intention. If the presence of a counter-impulse were sufficient to determine a mistake all of us should and would be constantly making mistakes. In the above mistake—the taking of the wrong train—chance, not the counter-impulse, was the determining factor. And chance might just as well have worked the other way, and there would have been nothing to analyse.

Example 23.—One morning, just as I was finishing a letter, my friend and neighbor, Dr. N., entered my library

and asked for a subscription blank for *Psyche and Eros* for his friend Mr. S. (a wealthy business man) who would send us his check as soon as we sent him a bill. I arose, went into an adjoining room for the requested blank and returned—with an envelope. At once the Freudian would say that I did not want the subscription, and he would be partly right if he did not tag on an “unconscious” counter-impulse. I did want the subscription, but I was skeptical about Mr. S.’s interest in a psychological journal and suspected that Dr. N. might have urged a friend of his to subscribe who was too polite not to oblige him. It was in this frame of mind that I went into the other room. In other words, I had really not resolved to get a subscription blank, or, to express it differently, my desire to get the blank was not strong enough to translate itself into the appropriate action. and this was augmented by the diversion of my attention to the envelope which I needed. Again there is no need for an appeal to an Unconscious.

An important matter now demands our attention. It will be noted that in *Examples 22 and 23* careful observation discovered a conscious counter-impulse or antipathy to the main intention. But what if no such intention had been discoverable, assuming that the lapses could have occurred without them? Freud’s answer would have been (*cf. l. c.*, p. 53) that the antipathy was an indirect one, *i. e.*, one not directly related to the intention which had been interfered with. Thus, for example, if a man forgets a rendezvous, it is not necessarily because he does not wish to meet the

person, although that is the most frequent cause (according to Freud), but because he has some unpleasant memories about the location. So, too, if a person forgets to mail a letter it is not necessarily because of the letter’s contents, but “because something about it reminds the writer of another letter . . . which did afford a basis for the antipathy.” In other words, the antipathy may be transferred from one thing to another. It follows, therefore, that when a lapse occurs all the subject has to do is to associate till he finds an unpleasant memory and then the analyst, finding what he requires, labels that as the cause of the lapse. The absurdity of such logic and such a technique is obvious.

Example 24.—On p. 91 of the third German edition of his book on the psychopathology of everyday life, Freud records, as an illustration of a symptomatic act, the fact that twice in a period of six years he had failed to stop in front of a certain door on the second floor of a certain building and started to go up to the third floor, although he had been going to that second floor twice daily all those years. He explains his mistake by saying that the first time he was absorbed in an ambitious fantasy in which he was steadily “climbing higher and higher”, and that the second time he was angry at an imaginary criticism of his writings in which he was charged with always “going too far.” (Parenthetically we’ll remark that the latter incident proves that Freud knew he had gone beyond what logic and facts warrant.) But what has this to do with the Uncon-

scious? Has there ever been a person who, while lost in a train of thought, which he did not wish to interrupt, has not sometimes gone a flight higher or a station further than he intended? How infinite must be the credulity of a person who can believe that a wordless and merely impulsive (conative) Unconscious can translate the words "to climb higher and higher" or "to go too far" into going up an extra flight of stairs! And if we concede to Freud a wish to climb, must we also credit him with a wish to go too far? Or must we infer that Professor Freud's Unconscious knows so much more psychology than the conscious Freud that it warns him that he is "going too far"?

We have cited the above only as an introduction to the observation which follows: One morning I was riding down town in the subway, reading Professor Freud's *Introduction* and intending to get out of the train at 59th Street, when an idea struck me which I considered so important that I wished at once to commit it to writing. At this moment the train pulled into the station, I made a rush for the door—and there became aware that we were only at 66th Street. A Freudian psychoanalyst, seeing me, would have said I wanted to get off at 66th Street or that I did not like to get out at 59th Street, perhaps because I didn't like the patient on whom I was about to call. All this unconsciously, of course. But he would have been wrong even if I had disliked that patient, or had had a grudge against 59th Street (my alma mater, the College of Physicians and Surgeons, is located there), or de-

spised the Columbus statue located there, or knew someone in 66th Street whom I would have liked to see, etc. If Freud's knowledge of English were equal to it, he might say that my rush for the door was the way that my Unconscious took to tell me that I was "too previous"—Freud's is a punning and slangy Unconscious—that I was going too fast with my generalization. As I see it, what happened was that my eagerness to write down what I thought translated itself into an eagerness to rush out into a place where I could make a memorandum without being jolted. (I can't write in a moving train.) Besides, I was only one station from my destination, had been too absorbed in the book and my thoughts to watch the stations, and did not wish to lose time by going beyond 59th Street. My eagerness determined only the speed with which I moved.

In Freud's "going too far" and in my eager rush to get something done, we observe a phenomenon which has escaped all observers but the psychoanalysts and which the latter, owing to their obsessive hunt for unconscious motives, have misinterpreted. This phenomenon, which I have named "somatization" and described in *Psyche and Eros* (Vol. 2, No. 4, pp. 239-240), consists in an involuntary, instantaneous, almost reflex, translation of an idea into some form of bodily action or function. It is a sort of living, active, somatic metaphor such as has led humanity to express itself in such locutions as "I can't see it" for "I cannot understand it." "my mouth waters" for "I desire intensely", etc. In the essay just referred to

I say: "Such conversions [somatizations] occur not only in the ocular but also in the olfactory, auditory, gustatory, tactile and other spheres. These metaphoric expressions are not mere phrases, mere analogies; they are literal statements of facts, embodiments of ideas. An inability or unwillingness to see does under circumstances cause a blurring of the vision; a person who is conscious of an intention to deceive another does under circumstances blink his eyes, modify his voice, and in other ways modify his body; an unwillingness to hear does under circumstances cause a momentary deafness; being psychically offended by someone or something does under circumstances cause nausea (hence the expression "I can't stomach him," etc.); a German-speaking individual intending to cheat another may under circumstances become aware of being dizzy (the German words for "to cheat" and "to be dizzy" being identical in sound); a woman carrying on a flirtation may under circumstances become "giddy"; a person may actually feel a sudden sharp stinging pain in the region of the heart on being told something painful (So Tubal "sticks a dagger" in Shylock's heart);* an unwillingness to do something may result in a temporary paresis or paralysis; the reluctance to say something may cause temporary speechlessness; a woman may suddenly become aware of a burning sensation ("burning shame!") if her attention is suddenly called to a spot on her neck where her lover's kiss left a mark; an insult which one has to "swallow" may cause a choking sensation (globus hystericus); a sud-

den realization of being penniless may give rise to a feeling of intense physical weakness; grief makes the heart feel heavy; a "sickening" idea causes nausea; life weariness causes loss of appetite; insincerity makes the eyes shifty; etc. (Last year, on the occasion of my first flight in an aeroplane, I was the victim of a curious somatization. While 1,000 feet above the North Sea I suddenly smelt smoke; on looking about me to see where the smoke came from, I realized that we were going through a cloud and that there was no smoke about. I explain this phenomenon thus: owing to the novelty of the situation, I had translated an unfamiliar optical impression into an olfactory sensation;—what my eyes saw required me to smell smoke. Many hallucinations are such somatizations, *e. g.*, the drunkard's "snakes.") Every reader can multiply these examples a thousand-fold. It is one of the essential characteristics of a living sentient human being to give to his ideas such somatic expression when he is under the influence of emotions or bodily or mental states that interfere with merely ideational or verbal cognition or expression. There will be no difficulty in understanding this if the reader will think of the parallel phenomenon described by Silberer as *the auto-symbolic phenomenon*. Psychoneuroses in the psychic sphere, *i. e.*, phobias and compulsions, are caused in exactly the

*A patient once said to me: "Just as you said that about my wife my heart sank within me", and undoubtedly his emotional state did affect his heart in some way that warranted his assertion.

same way as these conversion hysterias and they may also be considered as somatizations because they are accompanied with somatic symptoms expressive of and harmonizing with the fixation of the idea at the basis of the neuroses. The reader will have no difficulty in comprehending this process if he will bear in mind the fact, noted by all psychoanalysts, that analysed symptoms often turn out to be puns and word-plays. I had an inkling of this long ago when I said that the unconscious takes literally what the conscious takes symbolically, and vice versa. What I did not then know, and what the psychoanalysts have failed to realize, is that the genesis of these neurotic phenomena had nothing to do with criminal or sexual desires, with "repression" or with unconscious mental processes in the Freudian sense. Such "forbidden" desires may have been present at the moment of the neurotic fixation and symbolization, and may even have been responsible for the psychic state which made such a fixation possible, but this is a very different matter from the repressed desires of which the individual is not, has not been, and cannot be conscious and of which the psychoanalysts speak."

In his essay on transitory symptoms occurring during psychoanalytic sessions, Dr. Ferenczi mentions and discusses a number of such conversion symptoms as I have termed somatizations and explains them all as manifestations of repressed (unconscious) desires. He says (in Chapter 7 of his book, *Contributions to Psychoanalysis*, p. 166): "This somatic symptom is . . . a symbolic ex-

pression for an unconscious thought—or emotion-excitation that has been stimulated through the analysis," and on page 165 he thus explains the production of the symptoms: "if one . . . submits these . . . to analysis, it becomes plain that they really are representations, in symptom form, of unconscious feeling—and thought—excitations which the analysis had stirred up from their inactivity (state of rest, equilibrium) and brought near to the threshold of consciousness, but which before becoming quite conscious—in the last moment, so to speak—have been forced back again on account of their painful character (to consciousness), whereby their sum of excitation, which can no longer be quite suppressed, becomes transformed into the production of somatic symptoms."

To what fantastic explanations Ferenczi is driven by this theory is apparent, for example, from his explanation of a very simple phenomenon which probably many analysts have had numerous opportunities to observe and which often occurs—though Ferenczi does not seem to have noticed it—even outside of analysis and even in perfectly normal (non-neurotic) people. He says (p. 174) that just as he had made clear to a patient that her excessive ambition arose "from narcissistic fixation" [as if ambition didn't always have its main root in self-love!] and that she would be happier if she could renounce a part of her fantasies of self-importance, "she called out, her face glowing: 'It is wonderful, now I suddenly see everything, the room, the bookcases, so concretely clear in front of me;

everything has bright and natural colors and is so plastically arranged in space.' On further questioning I learned that for years she had not been able to see 'concretely', the outer world appearing to her dull, faded and flat. The explanation was as follows: As a spoilt child she obtained the satisfaction of all her desires; since she had been grown up the perfidious world had not been so considerate to her wish-fancies, whereupon 'she had not been pleased with the world;' she projected this feeling into the optical sphere [why and how?] by seeing the world since then changed in the way described. The prospect of reaching new possibilities of happiness through renouncing a part of the wish-fulfillments was similarly projected into the optical sphere [again we ask "why?"] and expressed itself there as illumination and more vivid reality of the perceptual world." The simple truth is that when we are unhappy all of us sometimes see life and the world darkly; "gloom enshrouds us" on such occasions, and, on the other hand, when we are happy the world looks bright and cheerful. The universality of the experience proves it to be a psycho-physiological and not a purely psychological reaction. In the light of this, how amazing is the simple faith and naivete of a person who can say, as Dr. Ferenczi does (*l. c.*, p. 166), that, "If one now translates the suddenly occurring symptom for the patient from symbolic to conceptual language, it may happen . . . that he at once declares, with great astonishment, that the sensory or motor state of stimulation or paralysis has disappeared as suddenly as it had

appeared. Observation of the patient shows unmistakably that *the symptom only ceases when the patient has recognized our explanation to be the correct one, not when he has merely understood it.*"

Does Dr. Ferenczi really believe that if he did not explain the symptom "correctly" it would never disappear? How absurd! Why, these transitory conversions or somatizations come and go thousands of times even though the analyst says not a word about them and though the subject has not the faintest notion of their meaning. In fact, the phenomenon, *e. g.*, a feeling of physical weakness if one suddenly feels himself desperately poor or helplessly in the toils, a sense of weight on suddenly realizing one's great responsibilities, etc., disappears after one or more seconds as soon as the individual recovers his poise, his equanimity,—*"collects himself,"* as it were. After such an experience one might well exclaim, with the ghost-visited Brutus: "Now I have taken heart, thou vanishest!"

In the absence of an opportunity to interview Dr. Ferenczi's patient, we tentatively offer the following interpretation of the sudden and, in all likelihood, temporary clarification of her vision: She suddenly realized ("saw clearly") that her analyst, like all others who had tried to influence her life, had no understanding of or sympathy for her ambition and preached renunciation as a cure for her discontent.

Example 26.—A somewhat curious kind of lapse was committed by Dr. S. He was lunching on bacon and eggs; his wife handed him the salt shaker with

the words: "salt the eggs". He took the shaker in his hands, raised it aloft, tilted it, hesitated an instant and then automatically, as if lost in a train of thought, put it a distance away from him, though he had intended to act on his wife's suggestion. He had no unconscious antipathy to salt either directly or indirectly, had not suppressed any idea associated with it, and had no repugnance to doing as his wife advised. Why then did he put the salt aside when he intended to use it? The answer is quite simple. The word "salt" at once recalled to his mind an essay he had read that morning in a medical journal advocating a salt-free diet as a means of lowering high blood pres-

sure; he was skeptical about the matter because the authors of the article said the treatment would have to be continued for a long time; this reminded him that his mother's blood pressure did not yield to treatment and that she was causing the family a great deal of anxiety; with this came the thought that it might be advisable to urge her to eliminate salt from her diet—and with that he put the salt from him. We therefore have here too an example of somatization, an idea instantaneously translating itself into an involuntary, unpurposed action for whose elucidation we require no hypothetical Unconscious.

[To be continued]

Are All Radicals Insane?

By THEODORE SCHROEDER, *New York*

"Aunt Fannie, bent upon the scandal of the neighborhood, sees many things which exist nowhere but in her own eyes. Yet she can bring you the confirmatory shreds of evidence. What is evidence enough for the utter condemnation of our enemies would be laughed to scorn if applied to our friends." (Prof. Ralph T. Flewelling. *Personalist* 2:209.)

Recently I was stimulated by the announcement of an article on: "The Psychology of the Radical." (*Yale Review*, Vol. 2, No. 1, pp. 89-101; Oct. 1921.) The author was Dr. Stewart Paton, a neurobiologist and psychiatrist. This raised hopes, that at last something worthwhile was being done for mental hygiene, in an important but neglected field. Doubtless he would instruct the sane, educated, and economically fortunate persons who read the *Yale Review*, just how society should conduct itself, especially toward the disinherited ones. I thought that the object of this advice would be to minimize the development of the morbid emotional conflict, which expresses itself in morbid radicalism, as well as the morbid patriotic conservatism. It is the intensities of these *two* groups that precludes the peaceful progress of the democratization of welfare. Unlike Dr. Paton, I was seeing all this morbidity as a human psychologic problem, rather than as a political or eco-

nomic class-problem. From this viewpoint, the mob violence of, for, or by well fed conservative patriots and by underfed or morbid revolutionists, presents the same psychologic mechanism and the same sociologic problem, in spite of the economic differences.

However, I was doomed to disappointment. Instead of a lesson in mental hygiene, I found a special plea on behalf of the economically fortunate ones, which suggested that all radical critics are insane. There is no intimation that all morbid radicals have their exact counterpart among conservatives. This false perspective was portrayed to Dr. Paton's evident satisfaction, and apparently without his having any personal acquaintance with any actual radical, and without any intimate study of any radicalisms. The natural tendency of his essay is to intensify the fears, and to rationalize the hatred of all morbid conservatives, and he admits "a widespread epidemic of insanity" including "all parts of the world, and among all kinds and conditions of men". Thus Dr. Paton has done his bit toward making impossible that mutuality of understanding, upon which alone depends our peaceful social evolution. By thus promoting a revolution by violence, Dr. Paton was actually violating his professed desire to the contrary. But why?

On the whole Dr. Paton presents a

smooth, easy-flowing discourse stating many psychiatric commonplaces, in their most logical and plausible form. The insanity of all radicals is conclusively proven by him, for all those who are uncritical, because uninformed about modern diagnostic methods, and who enjoy Dr. Paton's wishfulfilling phantasies about the characteristics that he ascribes to all radicals. In short his conclusions were reached by such immature intellectual processes, that one may well wonder what ails Dr. Paton? It is therefore Dr. Paton's mental processes that I propose to review. In what follows all quoted words, not otherwise credited are Dr. Paton's. All italics are mine.

PATON'S RADICAL UNDEFINED

It is important to note that Dr. Paton makes a diagnosis of "*the radical*", not of *a radical*. Nothing in his essay suggests that he has ever made a personal study of even one accredited radical. Furthermore, he does not inform us by what test one becomes an integral part of this imaginative, all-inclusive, synthetic personality of his own creation, which he calls "*the radical*". Obviously, here he is not using the methods of scientific precision, although his paper was prepared for highly educated readers. What morbid compulsion was behind this abandonment of his training in clinical methods? Apparently he is using the collective singular "*the radical*" much as it is used by ignorant and morbid persons, for whom it serves as an epithet of reproach, expressive mainly of fearful feelings. It also serves Dr. Paton as a convenient escape from the study of concrete realities, and gives the fullest play to his phantasies. Is not this conduct of Dr. Paton's just like that

of his "*the radical*"? And is it not likewise symptomatic of a personality that "is crippled emotionally"? If Dr. Paton was not mentally afflicted, just like "*the radical*", would he not have deemed some definition of "*the radical*" to be an indispensable prerequisite for a group-diagnosis? I leave the answer to Dr. Paton, because I am not a psychiatrist.

TESTS OF RADICALISM

I am sure, however, that I possess more than average acquaintance with radicals and radicalisms. I confess this with fear and trembling, because that confession alone may prove my insanity, according to Dr. Paton's intellectual methods. But then if I avoid the confession of this reality, that evasion would also tend to prove me insane. Tough luck!! Isn't it? But, that is part of the risk and the reality of living on the same earth with Dr. Paton.

Different groups of radicals each have a different procedure, crystalized into creeds that are often conflicting, but all designed to accomplish similar aims. The most inclusive, unifying factor among economic and industrial radicals can be expressed in this definition: A radical is one who is actively seeking to remodel our social system, according to the Communist Manifesto where it says: "From each according to his ability; to each according to his need." Within the narrow range of his family, probably even Dr. Paton practices this creed. Why not extend the range indefinitely? Only a little narrower is the aim of those socialists who prefer the following words of Abraham Lincoln: "To secure to each laborer the whole product of his labor, or as nearly as possible, is a worthy object of any government".

(Schleuter, Herman. *Abraham Lincoln and the Working Class*, p. 40.) Perhaps I should add that by the "whole product of his labor" the socialist means its social value, as distinguished from its market value, under our competitive system of exploitation.

Presumably Dr. Paton was familiar with these creeds, when he attempted an all-inclusive diagnosis of radicals. It is therefore, of persons who promote the realization of one or the other of these aims that he says: "Nor do they [radicals] seem to understand the importance of refraining from advocating the adoption of social systems of which *the best* that can be said is that it is a conception *not of sound minds*, but of those weakened by a feeling of inadequacy." In the light of these facts concerning the radical's aims, which Dr. Paton evades, his diagnostic conclusion about the insanity of "the radical" is not so obviously correct, as to have justified him in omitting all sustaining argument, or data. His unsupported conclusion is therefore adjusted only to the needs of those conservatives who are "crippled emotionally", and who wish their morbid fears rationalized, and are predisposed to accept uncritically anything that is offered. In Dr. Paton this method of diagnosis and its predetermined results, suggest a prejudice that is evidently conditioned by a fear of assuming a mature man's responsibility in a democracy of service, where privileged parasitism is prohibited. Does not that fear imply such a feeling of inadequacy as belongs not to sound minds? Dr. Paton's wholesale diagnosis is also of the "all or none" variety, which he says evidences morbidity. Again I ask, what is wrong with Dr. Paton's emotions? Are they as "crip-

pled" as those of "the radical"? According to my concept of evolutionary psychology such aristocratic feudal-mindedness and its craving for aristocratic privileges, are the very psychologic essence of an infantile parasitism. It is really too bad that Dr. Paton is so fearful of being weaned from parasitic pap, that he must declare insane all those who propose the democratization of service and of welfare. I fear he will suffer very much if the Bolsheviks should catch him and make him work for a living, just as wholesome but no better than that of any other. Would he then organize the I Won't Workers, and think sabotage or revolution an evidence of sanity?

PATON'S TESTS OF INSANITY

We have already seen that Dr. Paton found it desirable to make a psychiatric diagnosis of an imaginary synthetic radical, rather than a real, live one. It appears also that he found it more convenient to prove the morbidity of his hypothetical imaginative creation by the use of unusual standards of sanity. Seemingly at least, to be adjudged sane by Dr. Paton, we must be quite conservatively and aristocratically conventional in our way of meeting every critical situation. Therefore, according to Dr. Paton, in determining soundness of mind, the all important inquiry is, "what a person does". To act out of harmony with the privileged beneficiaries of things as they are is more than a significant symptom. Dr. Paton is quite conscious that conduct as a test of mental soundness, is not unusual among psychiatrists. He admits that: "*relatively few students of human nature understand the biological soundness of this [his] view.*" My own

mere layman's ignorant suspicion is, that most specialists in human nature have outgrown Dr. Paton's viewpoint upon this subject, and that some painful feeling of inadequacy has here made him boastful of his own backwardness.

Making physical manifestations a matter of prime importance, in psychiatric diagnosis of mere functional disorders, is the unenlightened layman's way of determining insanity. It has also been the way of the physician, at the beginning of psychiatry. With the growth of scientific observation and of its data, some have outgrown the older descriptive psychiatry, in favor of the genetic approach to diagnostic problems. Some have retained the antiquated viewpoint of the descriptive psychologist and have been content merely to elaborate their descriptions, and call that progress. I suspect that Dr. Paton belongs to the latter class. Then perhaps his error is that he mistakes a mere refinement of the descriptive psychiatry to constitute a new diagnostic method. To me it seems true, that the relatively sane and insane often indulge in the same conduct. The difference between the morbid and the wholesome ones is often found mainly in the differences of the quality of the underlying compulsion, and of its genesis. Such considerations have lead to the genetic approach to mental problems, which is completely ignored by Dr. Paton, while he is diagnosing "the radical". Under this our more modern view, "what a person does" is seldom a sufficient test, in borderland morbidity, but serves rather to give definition to the problem of diagnosis, which is to be solved by a study of the genetics of the conduct. Now the all-important inquiry is to discover the organic or psy-

chogenetic *why* and *how* of the compulsion behind the conduct to be diagnosed.

Being only a presumptuous layman in psychiatry, I must quote at least one authority in my support. First, I will remind the reader that Dr. Paton nowhere intimates that his imaginative collective "the radical" is in all its human units organically afflicted. Dr. W. H. B. Stoddard, an eminent psychiatrist, has recently confessed his more complete acceptance of this newer viewpoint in the third edition of his: *Mind and its Disorders*. There he says: "The physical manifestations of a functional disorder must be regarded as secondary, not primary, as I taught in my first edition." (*Psycho-Analytic Rev.*, 8:347.) Since Dr. Paton obviously failed to subordinate the outgrown descriptive psychiatry, in favor of a psychogenetic investigation of "the radical", does not this show in Dr. Paton such a "lack of discrimination and [such] inappropriateness of the response" to the radical's stimulus as justified him, in a case of "the radical", in adjudging him collectively insane?

CASE OF "THE FREEMAN"

The Freeman, of New York City, is a journal that professes to be "radical" and is just radical enough to advocate the single tax. It will hardly be classified as radical by the organized radicals whom Dr. Paton fears most. In an advertisement the *Freeman* was recommended to "tough-minded readers" (doubtless in Wm. James' sense) who indulge in "fundamental thinking". Now it seems to me that any "well balanced personality", other than Dr. Paton, and one that is "not forced to

withdraw from reality", and is therefore, "capable of appropriateness of reaction to [such an] occasion" would assume that the *Freeman* meant to use the word "fundamental" in the ordinary sense of: essential, important, unsuperficial. But, Dr. Paton tells us that if one is influenced by morbid fears, then "in the flight from reality he abandons the accumulated experience that man has gathered together during the progress of civilization". This accumulation is partly recorded in our dictionaries. One so afflicted might write of that advertisement as did Dr. Paton: "Probably he [who wrote the advertisement] would not have used these words, if he [and the prospective readers] had understood [that Dr. Paton had overruled the dictionary so] that 'fundamental thinking' is the kind of thinking characteristic of primitive people, or 'the civilized man after deterioration. Dr. Paton also informs us that: "*We find plenty of 'fundamental thinking' in cases of shell shock, nervous breakdowns and dementia praecox*". (For editorial criticism see: *The Freeman*, 4 (No. 88): 222-3; Nov. 16, 1921.) Now behold that miracle in diagnosis! By the simple trick of changing the usual meaning of a single word from his victim, Dr. Paton, the distinguished professor of neurobiology and celebrated psychiatrist, has proven a radical publisher, and those who enjoy the *Freeman*, to be quite insane like unto cases of "shell shock, nervous breakdowns and dementia praecox."

In this marvellous feat of diagnosis, Dr. Paton has left nothing to doubtful inference. "Shell shock, nervous breakdowns, [or] and dementia praecox" is conclusively established by the indis-

putable confession of the culprit himself. Isn't it wonderful? It even beats the so-called third degree administered by our lawless sadistic policemen as a means of extorting truthless confessions.

But, in my ignorance, I wish to know: Is this verbal trick of Dr. Paton's an illustration of "the improvement of mental processes" which is not "hair-splitting human argument", from which he says the insane radical must be "diverted" in order to enable the race to recover its sanity? Or, is Dr. Paton only compensating for not having studied any actual insane radicals, by making himself an exhibit of morbid mental processes? Is Dr. Paton really "all there"? These last quoted words are not from Paton's essay. He is too *skientifique* to use slang.

ON BEING CRIPPLED EMOTIONALLY

Dr. Paton himself has told us the symptoms when one "is crippled emotionally". Such persons are guilty of "withdrawal from reality" he says. This means that such persons ignore accessible facts which are pertinent to their interests or their problems, and consequently they live relatively much according to the demands of a world of their own phantasy. Such persons construct very plausible and logical arguments, to justify their morbid emotional needs, by the process of substituting wishfulfilling fictions in lieu of records of actual observation. Their justifications seem less logical, just as soon as the ignored data are adequately co-ordinated with the rest. Furthermore, persons who are "crippled emotionally" show it by "not relying upon well co-ordinated and integrated intellectual processes". "The radical", that is all radicals, show these

symptoms as Dr. Paton knows without having examined even one radical. Accordingly "the radical", that is all radicals, are seemingly considered by him to be "crippled emotionally". But does not Dr. Paton, in the article now under review, show all these same symptoms of "crippled emotions"?

It might be interesting to ask, since he fails to report a clinical study of even one of the available radicals and fails to supply a differential test for "the radical" group to be diagnosed (as above indicated) whether Dr. Paton is not unintentionally illustrating a "withdrawal from reality"? Also whether or not the failure to co-ordinate any concrete study of any particular radicals with his other psychiatric data, indicates that Dr. Paton, (at least when radicals are concerned) is incapable of "well co-ordinated and integrated mental processes", and therefore "is crippled emotionally"?

In psychiatric diagnosis, by some who are not "crippled emotionally", the present reaction of individuals will be co-ordinated with the environment and with the subject's character, both past and present, as an important method for the more intelligent determination of relative "inappropriateness of the response". From this point of view, all insanity is relative. I believe that in our lucid moments Dr. Paton and myself could agree upon this last proposition. However, it appears from the article under review, that Dr. Paton, by ignoring available data and by ignoring relativity, is "not relying upon [any such] well-co-ordinated and integrated intellectual processes", in reaching his conclusions about the relative insanity of his collective, imaginative, "the radical", or about the relative appropriateness of the radi-

cal's response to his particular environment.

If all insanity is relative, then the diagnosis of a group must include a study of the environmental background, in co-ordination with the provocative stimulus, as the only adequate means of determining relative degrees of "inappropriateness of the [radical] response", as a "well-graded and appropriate reaction". Dr. Paton does not even pretend to have done this. Instead he resorts to his own phantasy. Not claiming to have made a personal study of even one particular accredited radical leader, he proceeds to compare his synthetic imaginative "the radical" with an equally imaginative abstract ideal of mental processes, rather than with any actual process generally in use, among capitalists let us say. That is exactly the mental trick which morbid conservatives and morbid radicals always play, and it is symptomatic of their disorder. It is by such methods that Dr. Paton concludes that "*the best* that can be said is that it [the social systems advocated by 'the radical'] is that it is the conception *not* of a sound mind". Did Dr. Paton here allow "the wandering of desire [to] direct both instinct and interest and shape his entire program of living" especially his attitude toward "the radical"? If so, was it because Dr. Paton himself "is crippled emotionally"? Perhaps his feeling of inadequacy makes him doubt his ability to make good under a social system that would deprive both him and me of our present privileged positions. But why is he afraid? Are only the fearful ones now to be classed as sane? Are those of us insane who are unafraid even of Bolsheviks?

PSYCHOLOGIC EXPERIENCE AND UNDERSTANDING

Probably Dr. Paton never had the longing of a disinherited, disemployed and painfully hungry wobbly to exchange a bounteous sweat for a long overdue the next meal. If that should be so, then he is not too well qualified to decide just what is "a well graded and appropriate reaction" under such conditions. The feeling-value engendered by such experiences, even in the healthy-minded, can be adequately understood only by those who have felt them. They can be apprehended in proper perspective only by those, who have had the experience and then have surmounted the conditions thereof, so as to be entirely free from the fear of a repetition of the experience. That is a kind of preparedness for efficient living that may be beyond Dr. Paton's experience, and therefore leaves him fearful of his own adequacy, under industrial democracy.

Had Dr. Paton's crippled emotions permitted him to be more intelligently fair, he might have made a study of "the radical's" background of life in the city slums, and in the lumber camps of the south and the northwest; then he might have tried making a living as a short-weighted coal miner in Virginia or Colorado; Also it would have been helpful to him to get a few touches of high life as a worker in the copper mines, around Bisbee or Butte; he might also try mining around Cripple Creek, or hold a common laborer's job under the steel trust. Thus equipped, in addition to his neurobiologic lore, he could have expressed a valuable judgment of *relative* healthy-mindedness, by asking himself if he could remain as sane, let us

say as Lenin or Gene Debs now is, if the crazy Bolsheviki during all his life had compelled him to choose between starvation and such a life as our American radicals have witnessed, at some such places as the above? Then, too, he might have been able to enquire how far his affluent and equally morbid friends are the responsible beneficiaries of having morbidity forced upon others. Without having used these means for determining relativity in the "appropriateness of the response", and without having studied even one particular radical, does not his group-diagnosis of "the radical" show him as "not relying upon well-co-ordinated and integrated intellectual processes"? If so, then is he not, by his own standards, made to appear as one who "is crippled emotionally"? One wonders how far he is removed from "nervous breakdown." If he regressed mentally in typical "dementia praecox" fashion, would Dr. Paton then join the Anarchists, Socialists, Syndicalists, Bolsheviks or the I. W. W.? By the way, I wonder if Dr. Paton knows what words are symbolized by those terrible letters: I. W. W.? Is it just an "I Won't Work" club, of rich people out of a job?

Of course, I am not a neuro-biologist, so I am not able to diagnose Dr. Paton's case from this one article of his. In my ignorance it would be difficult for me to say whether Dr. Paton is suffering from dementia praecox, or senile dementia, or both, or neither; or from home brew, or just plain cold feet. I am only putting it up to him to apply his own diagnostic methods and tests to himself, just as he applied them to his synthetic phantasmal "the radical". I admit that I am disqualified from answering such ques-

tions as I am asking, and disqualified even in other ways than by not being a neuro-biologist.

"SLOPPY SENTIMENTALITY"

Dr. Paton further says: "The radical who talks *so much* about his love for the people and the masses, is not any surer of the basis of his humanitarianism than is the man sure of his honesty who boasts publicly of possessing this particular virtue." In my ignorance, I believe that to be a true statement of a frequent psychologic mechanism. But—I suspect that here again Dr. Paton illustrates "a flight from reality" and resorts to a wishfulfilling phantasy in creating "the radical", whom he wishes to prove insane.

For nearly twenty years I have been engaged in fruitless effort to promote, among conservatives like Dr. Paton, the intellectual hospitality which is indispensable "to the emotional and mental dispositions favorable for the peaceful and rational adjustment of international and social difficulties." By the way: Dr. Paton then was too busy to give any aid to the peaceful solution of human problems. His feet were still warm then. Before the Russian revolution all effective lawless violence was used by conservatives, and therefore was sane.

To keep informed on invasions of free speech, I subscribed for and read many radical periodicals. For some years I conducted an open forum in Brooklyn where I weekly heard radicals and conservatives debate. For more years I lectured before thirty or forty liberal and

radical clubs and always was publicly subjected to their criticisms. In this manner, during the lecture season, I appeared from two to eight times per week before radicals and in debate with them. I have talked with every theoretic variety of radical, and have seen some of them exhibit all the same symptoms of morbidity, that can be found among Dr. Paton's conservative friends. Yet, I have never heard or read of one radical who "talked much [or at all] about his love of the people and the masses."

I have heard a very few pious conservatives say that people generally and radicals particularly, should love their exploiting neighbors as themselves, and should turn the other cheek, etc., etc. Also I have heard persistent rumors that an occasional conservative politician with a corporation label talks of his love for the common people. But according to my observation, the radical's *conscious* attitude is not one of wanting to be loved, nor of offering love. Earnestly and persistently he demands economic justice, according to unconventional standards of justice, that will give him the entire product of his labor. This conception of justice the radical insists is based upon a larger co-ordination of facts than can be marshalled in support of the sentimental approval of the generally accepted standards of economic justice. The talk of a generally diffused love is so foreign to the conscious part of his psychology that I must doubt that Dr. Paton had at hand even one such statement, taken from among the many

thousands of pieces of literature issued by accredited radicals* Am I wrong in my surmise, Dr. Paton? Perhaps such radicals as are devoted to the dogma of economic determinism, will all have a ready explanation for Dr. Paton's necessity for creating a fictitious radical, and then for declaring his collective imaginary radical to be insane, by comparing his imaginary personality with an equally imaginary and undefined abstract ideal of mental processes.

If Dr. Paton had possessed a better understanding of the genesis and mechanism of the subjective conflict, which is the essence of "crippled emotions", or if he had applied that understanding to an actual study of a few accredited radical leaders, he would have seen the absurdity of his phantasy of a radical preaching a morbid love of humanity. No- the morbid radical shows his morbidity, when it exists, by a conscious attitude and public conduct, that is always negativistic toward the great crowd. The victims of the same subjective conflict, who hold the love attitude in consciousness, become religious, or 101 per cent patriots, some of whom so love God, or the masters of their country, that they must organize mobs to kill economic heretics and even imaginary enemies. Dr. Paton never preaches mental hygiene to such. I wonder why?

THE WAR INSANITY AND PATON'S REMEDY

In this article Dr. Paton says that: "A large part of the world since 1914 has shown signs of insanity." Some persons more familiar than Dr. Paton with what had been going on in the real world, saw the symptoms many years

before 1914. Long ago some radical humorist suggested that the inhabitants of other planets must be using this world as their insane asylum. Had Dr. Paton been in open-eyed relation with the realities of his larger social environment, he too might have known the widespread "signs of insanity" long before 1914. Then he would have co-ordinated such American movements as: Holy Rollers, Holy Jumpers, Angel Dancers, Theosophy, New Thought, Divine Science, Christian Science, Mormonism, and scores of other freak religions, all exhibiting the same psychology as the more orthodox revivals, under Billy Sunday and under the army of less efficient imitators. He might thus have also known of mass violence inflicted upon religious, industrial and economic heretics, negroes and whites, all by respectable conservative mobs, sometimes by the police, all acquiesced in by the general public, and through relative inaction in effect approved by our courts. Then he might also have heard of a score of riotous suppression of free speech, in as many important American cities and long before the war. If in addition he had been able to study judicial action with the critical eyes of both a lawyer and psychologist; And likewise had he studied the clergy and the great newspapers,

*Nettlau, Max. *Bibliographie de l'anarchie* Bruxelles & Paris, 1897, 294 p. This has since been extended in manuscript so as to contain about 100,000 items, including anti-radical items. For a select list of recent material see: Zimand, Sacel, *Modern Social Movements*. Descriptive summaries and bibliographies, H. W. Wilson Co., 1921, 250 p.

with a desire to discover their distortions, evasions and suppressions of facts; If Dr. Paton had lived in the world of reality and had studied all this to see how much of dissociated personality is everywhere evidenced, war insanity would not have been novel to him. Had he studied the frame-ups against radicals, their lawless deportations, as from Bisbee and elsewhere, and their legalized deportations to foreign countries; Also the mobbing and killing of organizers, of even the conservative American Federation of Labor, and had he studied critically the judicial decisions in cases, of radicals and on labor problems, and free speech cases, the symptoms of insanity brought to his notice by the war could not have seemed new.

Being economically privileged he could, before the war, indulge his phantasies and create a world to his liking, just as his imagination created "the radical" to fit his emotional needs. Hence the evidence of our racial infantilism and childishness, that he first saw during the war, came to him as a newly created fact, rather than as an acute culmination of long existing and obvious tendencies.

What is more important, however, is that we consider the remedies offered by this distinguished psycho-therapeutist. Fortunately he makes it very simple, just as simple as his diagnosis of "the radical", and wholly free from technical jargon. The ability to simplify the complex, especially in abnormal psychology, is convincing evidence of real genius. If anything more is necessary to prove Dr. Paton a genius, his remedy for racial insanity supplies the need. All we need to do, he tells us, is to advise the insane radical (and shall I include the international financiers who are masters of

war and peace?) "to cultivate a disposition favorable to a peaceful solution of social difficulties." And this changed disposition seemingly can be very easily brought about, by simply "diverting attention from hair-splitting human arguments to the improvement of mental processes". The National Committee of Mental Hygiene will please take notice of this very simple remedy. I find no other suggestion in his article. Obviously this change away from a morbid disposition is deemed, by Dr. Paton, to be so simple as to need no elaboration of technique. Just tell it to the insane ones, in his words and the cure is effected, no doubt! Was Dr. Paton really trying to help along "only good mental hygiene" or was he perhaps exhibiting in his own sacred person some symptoms of shell shock? I am not a psychiatrist, nor a university professor, so I must leave it to him to answer.

TESTING RELATIVE MORBIDITY

I have already indicated that morbidity is always a matter of relativity. From this viewpoint it might be instructive to make a comparative study of the emotional disturbance of Dr. Paton and some selected radical leader. As a means to this end, it might be interesting to have a public debate between Dr. Paton and some such radical as Morris Hilquit or Clarence Darrow. But they are skillful lawyers and therefore Dr. Paton might not have an equal chance. Next I think of Gene Debs and big Bill Heywood. But at this writing Debs is still in jail for having cultivated "a disposition favorable to a peaceful solution of social [international] difficulties", and Dr. Paton is not helping him to get a pardon. Bill Heywood is in

Russia, a fugitive from what is judicially called justice. So that is impractical, besides being unfair to Dr. Paton, who is only a psychiatrist and perhaps not a specialist in economics. Next I think of Roger Baldwin, Scott Nearing, or Max Eastman. These men like all the rest whose names I am mentioning have done things, disagreeable things, and have been under arrest. But also these last three have been "educated" and like Dr. Paton they have been university teachers. I wish to make it easier for Dr. Paton because I too am something of a privileged parasite, and have in my insane way a fellow feeling for him. Perhaps the radical's insanity would shine brighter if we selected some one who has seen more of the inside of jails than of universities, to say nothing of never having been a Professor. Just an ordinary wobbly should represent the radicals. I want Dr. Paton to shine at his best in this comparative test. So then, I would like his permission to arrange a public debate between him and Red Doran, Elizabeth Gurley Flynn, Bill Z. Foster, Anton Johannsen, or Kate O'Hare. One of these extremely undesirable citizens would defend his or her own personal economic radicalism and jail record and Dr. Paton is to show its lack of co-ordination of economic data. This debate, right out in public, would be a mildly "critical situation" especially if Dr. Paton and his opponent each are victims of a morbid money complex. Then let us have present a committee of psychoanalysts, who are specialists in functional mental disorders. Let this committee decide for the public whether Dr. Paton or his radical opponent gives the more numerous signs of being "crippled emotionally" by their avoidance of

the hard cold realities that come to the human cogs of our economic and industrial machines.

Dr. Paton, by declaring in effect that "the radical" collectively is insane, has practically issued the challenge, for testing a relative sanity. I wish to have his challenge accepted. Has he such a "a sense of accomplishment and [of] being emotionally equal to the occasion" of such a test, which feeling he says "is a measure of a person's preparedness for actual life"?

Will he come to the fore and give us an illustration of that "sane intellectual leadership now urgently needed in every phase of life" because, obviously to him, not even the conventional politicians supply it? Will he now, by contrasting his own superior capacity for "well-graded and appropriate reactions" to the stimulus of the insane radical, or of his economic theories, set the world an example in 'good mental hygiene'? Will he show just how our acute problems, of the unemployed rich and the disemployed poor, are to be peaceably settled on a higher intellectual level for determining economic justice, and with the permission of the beneficiaries of things as they are? Thus he could "assist students [by illustrative example or otherwise] to recognize signs of insanity and to become familiar with the principles of good mental hygiene," and at the same time he could help the rich "to cultivate a disposition favorable to a peaceful solution of social difficulties" by inducing them to accelerate the natural processes of democratization.

This debate would also enable him to show that he alone among moderns has profitted by rediscovering what Dr. Paton says "the Greek recognized . . .

[namely] the effect of graceful posture and action upon the finer sentiments and the entire intellectual life." When showing us how a "graceful posture" will produce a more refined sense of economic justice, Dr. Paton surely will shine as compared with his awkward, clumsy, insane, radical, opponent. Thus he will stand out in bold relief, while he demonstrates that he alone never loses, much less does he "abandon the accumulated experiences that man has gathered together during the progress of civilization." Will he agree to meet such a radical in economic debate, if I find a jobless one with leisure, to meet him?

If Dr. Paton's self-sufficiency will permit, he will come, and by exhibiting his superiority he will prove that these radicals think as do victims "of shell shock, nervous breakdowns, and dementia praecox." If he won't face this test of relatively wholesome views on economic problems, then may we not infer that the real impulse for his article was to mask his fear and feeling of inadequacy? Here then is his chance to prove himself more sane than those who invite us all to practice: "from each according to his ability, to each according to his need."

And yet, Dr. Paton is obviously such a kind and gentle soul, that his genial temper breathes all through his article. Evidently he never had his collar mussed by riding a breakbeam. Also he is not sufficiently informed in evolutionary psychology to see that his profound prejudices are formed on an infantile level of desires, and justified on a childish level of mental processes. Apparently his prejudices also leave him quite unconscious of the pernicious influence of such an article, as of his underlying great fear of radicalism.

Have I proven Dr. Paton as insane as "the radical"? If so it is because I have been only as unfair as he was toward radicals, and like him, I have ignored the genetic approach to the problem of diagnosis. Lest the radicals who may read this, shall too hastily think Dr. Paton insane, I will requote the lines at the beginning of this article. "Aunt Fannie bent upon the scandal of the neighborhood, sees many things which exist nowhere but in her own eyes. Yet she can bring you the confirmatory shreds of evidence. What is evidence enough for the utter condemnation of our enemies, would be laughed to scorn if applied to our friends."

The Singing Eunuch in Seventeenth Century England

By W. J. LAWRENCE, *Dublin*

Although good old Mother Church has many sins to answer for, she does not justly bear all with which she has been saddled. Musical historians have for long propagated the fallacy that the uprise of the singing eunuch was due to the necessity to provide the Papal Choir with a sufficiency of properly-trained soprano voices. So much stress has been laid on the admission of Padre Guolamo Rossi, the first recorded warbling castrato, into the Pontifical Chapel in Rome in 1601—doubtless in its way an epoch-marking event—that the world has begun to hold the Church responsible for imitating that brutal, systematically pursued practice whereby a boy's beautiful soprano voice was, with little or no loss of quality, preserved beyond puberty. Little as one has any desire to minimise ecclesiastical culpability, it must at least be said, simply as a matter of historical truth and not by way of condonation, that the Church, in taking into its service the singing eunuch, did nothing more reprehensible than sanctioning a practice long in vogue. Thanks to the muddling of our musical historians, it is too late in the day now to inquire by whom the system of making artificial voices was devised or when it originated; but one thing at any rate is certain—the soprano or contralto-singing male adult had formed part of the regular retinue of the Italian ducal courts

for more than a generation before Padre Rossini joined the Papal Choir.

Properly read, Shakespeare reveals the truth of this. Anachronism and the absence of local color were with him often intentional, a policy pursued in portraying the ancients to render them creatures of flesh and blood to the illiterate. Thus, when in *A Midsummer Night's Dream* (1598) he caused Theseus to be proffered

"The Battle of the Centaurs, to be sung by an Athenian eunuch to the harp," he had no authority for his singing eunuch and was merely reading into ancient days a custom of contemporary Italy. Equally absurd from the standpoint of historical exactitude, but more patent in its absurdity, is Cloten's dismissal of the serenaders with, "So, get you gone—if this penetrate, I will consider your Musick the better: if it do not, it is a vice in her ears, which horse-hairs and catguts, nor the voice of unpav'd eunuch to boot, can never amend." Notwithstanding the allusion here, it is not to be argued that the aubade in *Cymbeline*, "Hark, hark the lark at Heav'n's gate sings" had been written to be sung by a castrato. The treble voice of the boy by whom it was rendered would sufficiently bear out the allusion. Before one could champion a strictly literal interpretation of Cloten's speech one would have to prove the ad-

vent of the singing eunuch in England in Shakespeare's time, regarding which, if it happened, all one can say is that it is mightily strange no direct reference to the circumstance has come down to us.

But we do not require to presuppose any such event to account for Shakespeare's knowledge on the subject. The absorptive poet was at home in all aides and had a splendid faculty of picking other people's brains. Recall that the gallant of his day was more familiar with Italy than he was with his own country and you get at once the source and the cause of these allusions. Since the *castrati* of old were skilled instrumentalists as well as entrancing singers, there is knowledge behind Viola's apposite suggestion:

I'll serve this duke;
Thou shalt present me as an eunuch
to him,
It may be worth thy pains; for I can
sing,
And speak to him in many sorts of
musick."

Whether it was that Marston had been in Italy and Shakespeare had not, there is evinced in *The Malcontent* (1603) a deeper intimacy with the life of the *castrato* and with his physical peculiarities than the immeasurably greater poet discloses. When asked by Malevole, "Canst sing, fool?" Passerello replies, "Yes, I can sing fool, if you'll bear the burthen; and I can play upon instruments scurvily, as gentlemen do. O that I had been gelded! I should then have been a fat fool for a chamber, a squeaking fool for a tavern and a private fool for all the ladies." The tendency of the *castrato* to put on flesh, here referred to, was to prove an

embarrassment in the days when he became the leading attraction of Italian opera and by dint of endowing the Samsons and Alexanders and other historical supermen with feminine tones and lymphatic bearing delayed progress on the dramatic plane for something like a century.

It is not until Restoration times that we have any trace of the singing eunuch in England. Even then what looks like the first record of his coming proves on examination to be delusive. Pepys in his Diary on July 2, 1661, makes a note of a visit paid to the Duke's Theatre to see the Second Part of Davenant's opera, *The Siege of Rhodes*, "which indeed" he says, "is very fine and magnificent, and well acted all but the Eunuch, who was so much out that he was hissed off the stage." The reference here is simply to the unfortunate wight (his name has not come down to us) who played the part of Holy, a eunuch basso in the opera. Pepys' discussion of subsequent events shows that he had not yet heard a castrato.

Almost six years later, or, to speak by the card, on February 16, 1667, our worthy diarist went by invitation to Lord Bronncker's house to taste of the quality of some Italian singers and instrumentalists whom the King had recently brought over for his private entertainment. In recording his impressions, he writes:

"And by and by the musique, that is to say, Signior Vincentio [Abrici], who is the master composer, and six more, whereof two eunuches, so tall that Sir T. Harvey said well that he believed they do grow large by being gelt as our oxen do"

Doubtless because it was of a second

or third-rate order, Pepys was not enraptured with the vocalism of the eunuchs. "They sing indeed pretty high," he adds, "and have a mellow kind of sound," but he had heard natural English voices that he liked better. Further experience failed to correct his impression. On April 7th following, it being Easter Sunday, he went to the Queen's Chapel at St. James' and again heard the Italians, his verdict being "but yet the voices of eunuchs, I do not like like our women." An indication, if we had none other, that Pepys was strongly sexed.

Here we have the first record of the singing of castrati in an English place of worship. This phrasing, however, is apt to prove misleading. Though the Roman Catholic religion was then proscribed in England, Charles' Portuguese consort had the right by international contract to set up a private chapel in the royal precincts. Castrati never sang in an English church proper, but so long as a Catholic chapel was maintained at court they were occasionally, not regularly, heard there.

Nothing if not an amateur of music, Pepys was soon to revise his opinion as to the possibilities of the artificial soprano voice. In October, 1668, we find him making three rapidly-successive visits to the Theatre Royal to hear a newcomer whom he at first misleadingly calls "a French eunuch"—an unhappy phrase, seeing that France never fostered castrati. After his second visit he explains himself in preserving his impressions of the mysterious stranger's singing in the old pastoral of *The Faithful Shepherdess*, "who, it seems, is a Frenchman, but long bred in Italy." It could have been no ordinary artist of whom he

had perforce to write, despite his prepossessions, "but such action and singing I could never have imagined to have heard and do make good whatever Tom Hill used to tell me." The more he heard him, indeed, the more he marvelled. After his third visit he wrote:

" . . . saw the Faithful Shepherdess again that we might hear the French eunuch sing, which we did, to our great content, though I do admire as much his singing, being both beyond all I ever saw or heard."

Castrati of the first order were not so abundant in Europe at this period that there should be any grave difficulty in determining the identity of this particular singer. Yet, possibly for the reason that Pepys may have blundered in recording the gossip concerning the admired one's antecedents, musical historians have given up the problem in despair. If we could assume that the statement as to the singer's French origin was incorrect, there would be some grounds for believing that Pepys had the good fortune to hear Baldassare Ferri, the greatest artificial soprano of his time. Born at Perugia, in 1610, Ferri met with an accident in boyhood which proved a blessing in disguise by necessitating the surgical operation which preserved his beautiful voice and thus set him on the road to fame and fortune. From eleven to fifteen he was a church chorister, but in 1625 Prince Vladeslas carried him off to Poland, where he remained until 1665, when he entered the services of Ferdinand III, Emperor of Germany, whose successor, Leopold I, showered on him noble gifts. He retired to Italy in 1675 and died in Perugia five years later. Tall, handsome, refined, a singer of pathos and

power, he aroused enthusiasm wherever he went. Of his voice it has been said that it had "an indescribable limpidity, combined with the greatest agility and facility, a perfect intonation, a brilliant shake and inexhaustible length of breath."

English musical historians have been much exercised in mind over Ginguené's statement (as cited by Fetis) that Ferri visited London and had a remarkable experience there after singing as Zephyr in some unspecified piece. On emerging from the theatre he was confronted by a masked lady who silently presented him with an emerald of great value. Grove, ignoring the manifold inconsistencies of early opera and forgetful of the fact that Tenducci, a noted eighteenth-century castrato, sang in Dublin as the Aerial Spirit in *Comus*, ridicules the idea of an elderly and doubtless portly eunuch figuring on the stage as Zephyr. But the circumstances are all in favor of Ginguené's statement. Ferri, whenever he appeared on the English stage, must have sung extraneous songs in a foreign language: obviously the character or characters he sustained would either have been introduced or of so trivial a significance that speech was not demanded of him. Apart from the fact that a pastoral like Fletcher's *The Faithful Shepherdess* would appropriately bear the interpolation of a Zephyr, there may possibly be something more than coincidence in the fact that an old play was revived in 1668, to wit, Heywood's *Love's Mistress*, in which Zephyrus plays a silent role. Such a character would form a ready medium for the exploitation of the vocal fireworks of an Italian visitor. Heywood's masque-like play was revived at the Duke's Theatre

on August 15, 1668, and probably given intermittently for some time, seeing that the Duke's company presented it at court in the King's private theatre on June 3, 1669, in honor of the Grand Duke of Tuscany's visit.

For almost a score of years a gap occurs in our story, but in 1686 Giovanni Francesco Grossi, otherwise Siface, came to England to lend the beauty of his fine soprano voice to King James' choir. Although he remained in London a couple of years and had been heard in opera at Venice in 1679, it cannot be found that Siface during his stay made any appearances on the stage. Under date "January 30, 1687," Evelyn records in his Diary:

"I heard the famous eunuch, Cifaccio, sing in the Popish chapel this afternoon; it was indeed very rare, and with great skill. He came over from Rome, esteemed one of the best voices in Italy—much crowding, little devotion."

Evelyn's comment recalls how the afternoon services of three-quarters of a century ago at St. Patrick's Cathedral in Dublin were facetiously known, from the irreverent crowds they drew, as "Paddy's Opera." On April 19 following, the diarist repaired to Pepys' house and after studying Siface's methods at closer range, recorded:

"Indeed, his holding out and delicateness in extending and loosing a note with incomparable softness and sweetness, was admirable; for the rest I found him a mere wanton, effeminate child, very coy and proudly conceited, to my apprehension. He touched the harpsichord to his voice rarely well. This was before a select number of particular persons whom Mr. Pepys invited to his house, and this was obtained by

particular favor and much difficulty, the Signor much disdaining to show his talent to any but Princes."

During the last lustrum of the century excessive rivalry between the two London theatres led to the expedient of bringing over foreign singers, dancers, acrobats and pantomimists, with the vain hope of reviving "that sickly appetite" (as Colley Cibber put it) "which plain sense and nature had satiated." In this way there came to England one or two Italian castrati whose names have escaped the notice of the musical-dictionary makers. A clue to their presence is given in the epilogue to Farquhar's *Love and a Bottle*, written and spoken by the facetious Joe Haynes at Drury Lane in December, 1698. After referring in humorous vein to the disastrous competition between the two theatres and to the fact that old Drury had begun the trouble by importing some French singers, the epilogue goes on:

"When their male-throats no longer
drew your money,

We got ye an eunuch's pipe, Seignior
Rampony.

That beardless songster we cou'd
ne'er make much on:

The females found a damn'd blotch in
his scutcheon.

An Italian now we've got of mighty
fame,

Don Sigismondo Fideli—there's music
in his name;

His voice is like the musick of the
spheres

It shoul'd be heavenly for the price it
bears.

[“£20 a time” in margin]

He's a handsome fellow too, looks
brisk and trim,

If he don't take ye, then the devil take
him."

Of the "handsome fellow" nothing further can now be gleaned, but Hawkins has happily preserved a few details concerning Signor Rampony. He had formerly been in the service of the Prince of Vandemont and sung at a London concert, both in Italian and French, on March 28, 1698.

Notwithstanding the risk run of killing the goose that laid the golden eggs by a continuance of the advanced prices of admission necessitated by these costly exotic entertainments, Drury Lane steadily pursued its two-edged policy. In April, 1699, Clementini, the sopranoist, described as "servant to the Elector of Bavaria," sang there, and, if Gildon is to be believed, had all the women of fashion running horn mad after him. Coming events were casting shadows before, but as yet the singing eunuch stood in the vestibule of his English glory. The triumphs of the Nicolinis and Farinellis were to be affairs of another century.

Note on Psychoanalytic Nomenclature: Rationalisation vs. Paralogism

By JAMES S. VAN TESLAAR, M. D., Brookline, Mass.

One of the difficulties of psychoanalysis revolves around the matter of nomenclature. Freud himself has pointed out the abuse to which the term "complex" is being subjected. Many other terms are similarly in a state of flux. Considerable observation and study will be required before the legitimate province of most psychoanalytic concepts will be properly delineated. In particular the concept of the *libido* is a most difficult one to keep within empiric bounds. In a way it is no wonder that Jung has attenuated and vaporized and otherwise spread the libido concept out of all resemblance to Freud's meaning. Like many another psychoanalytic concept "libido" will continue to be a subject of controversy for some time since it lends itself readily to metaphysical speculation on account of its broader connotations. The speculatively-minded, preferring to soar into the rarified atmosphere of metaphysical system-building, instead of confining themselves to the level of empiric knowledge, are easily lifted off their feet by such a concept as Freud's libido.

It is incontestably the privilege of the pioneer in a new science to formulate his general concepts and to make use of the terms that best represent the facts and discoveries which he brings to light. New concepts, like those of psychoanalysis, require new terms.

But alongside the new psychoanalytic terms proper, the introduction of which was inevitable (as well as fruitful), there are some, mostly among the expressions introduced in psychoanalytic writings by others than Freud, which should be avoided because they are vague and incorrect.

A typical example of this class is the term *rationalisation*. This word is not only vague and incorrect, but superfluous and confusing as well.

Broadly speaking rationalisation is applied to any false reasoning that deceives him who employs it. But the use of "rationalisation" in that sense is manifestly forced and artificial. It is a use justified neither by etymology, custom, nor scientific nomenclature. Like the term *psychologism* for *subjectivism*, which was once favored but is now abandoned, the use of "rationalisation" in the sense of "false reasoning" is highly conventional and arbitrary.

Moreover, the word is misleading even in its arbitrarily set sense. So far as analogy with "psychologism" and terms similarly conventional and obsolete justifies the use of it at all, "rationalisation" is practically synonymous with "sophistry." Many writers actually use it in the sense of "sophisticated reasoning." But a sophism is false reasoning that deceives the hearer, not him who propounds it. Careful writers therefore

have recourse to a circumlocution whereby they point out the specific sense of "self-deceptive reasoning" in which they employ the word "rationalisation." This in itself betrays the insufficiency of the term,—its character as a poor substitute for a needed scientific expression.

Spiritualists and other sectarian cults are addicted to the habit of using general terms and common words in a highly artificial sense and therefore understood only by themselves. In science such a practice is inadvisable; it is confusing as well as unnecessary.

How unnecessary it is to resort to such artificial expedients in scientific nomenclature may be illustrated by the facts in the case under consideration. There has been used in the history of thought, specifically in the speculative psychology of the past, a term that precisely covers the sense artificially given to "rationalisation",—a term that has the advantage of being etymologically correct both as to form and meaning. The term—*paralogism*—has been used by Kant in his Critique of Pure Reason to designate the form of *fallacious reasoning involving self-deception*. He contrasted it with *sophism*,—false reason-

ing which deceives the hearer. Moreover, Kant realized that *paralogism* is an unconscious process; and, being impressed by its omni-presence in the speculations of man, he considered it due, perhaps, to a fundamental defect of the human mind.

Of course, other philosophers and speculative writers have made abundant use of the term. The fact that "*paralogism*" has been conceived upon the hoary mists of metaphysical speculation need not deter us from adopting it in science, for it comes down to us precise in meaning, correct in form and valid,—a term corresponding to incontrovertible facts of experience.

Kant, it will be remembered, was not merely a speculative philosopher. He also had numerous scientific interests at heart and was an intuitive psychologist of the highest order. With this, as with many other terms of his coining, Kant refers to a peculiarity of man's *psyche*, the truth of which psychoanalysis has richly corroborated.

We cannot do better than adopt the term *paralogism* whenever we mean "self-deceptive reasoning."

REVIEWS

LORAND:—Vergesslichkeit u. Zerstretheit, u. ihre Behandlung durch hygienische u. therapeutische Massnahmen. [Forgetfulness and Confusion: their treatment by hygienic and therapeututic measures]. Leipzig: Werner Klinkhardt, 1920.

Lorand once wrote a good book about growing old and especially about the significance of the internal secretions, especially that of the thyroid. In his book on human intelligence and its improvement by hygienic and therapeutic measures it was already apparent that he had ceased to tread the sure path of science and had postulated all sorts of bold theories. It is a pity that our author has now ventured into a territory in which he is not at home. Confusion and forgetfulness are symptoms of a neurotic psyche, or, if you like, problems of affectivity which Bleuler has so brilliantly illuminated. Forgetfulness is a matter of affective endowment; confusion is a symptom of internal distraction. Both phenomena are manifestations of dissociation. Lorand has much to say about the evils of excessive smoking and drinking and of digestive disturbances as causes of forgetfulness, but the psychic causes are considered so superficially and with such evident ignorance of the available data, that we must energetically call the gifted author to a halt. It is questionable whether the book will be of any value to the laity to whom it was intended to bring light. It is apt to mis-

lead many neurotics to attempt to cure their constipation with all sorts of electuaries instead of investigating the confused voices of the sick psyche. The title page, depicting two laborers shovelling coal into an open skull, is in very poor taste. I fear it is the kind of coal with which the war acquainted us and that the fire will grow cold all too soon. Lorand recommends a definite diet for strengthening the memory. I would suggest adding to this a psychic diet which would first emphasize the need to throw all superfluous mental ballast overboard.

Stekel (T.)

FREUD, SIGM.—Ueber die Psychogenese eines Falles von weiblicher Homosexualitaet. [The psychogenesis of a case of female homosexuality]. Intern. Zeitsch. f. Psa., 1920; 6:1—24.

A very interesting essay which demolishes the legend of a third sex and proves that feminine homosexuality is also to be regarded as a definite neurotic arrangement. Unfortunately the patient's dreams, upon which Freud lays such great emphasis, are not told us. The essay contains a number of other interesting and suggestive comments and hints.

Stekel. (T.)

NUNBERG, H., M. D.—Über den katatonischen Anfall. [Catatonic attacks]. Id., pp. 25-49.

This is the analysis of a case of schizo-

chology from a monistic-energetic viewpoint. But he has not made it easy for the reader to go through these lectures. Neutra sits high in the clouds and lectures on philosophy and psychotherapy with the dignity of a High Priest who possesses the gift of making what is simple obscure and what is complicated simple, if one follows his mode of thought. The book contains much that is worth while, but this has been garnered from all sorts of analytical sources and is buried in a mass of unintelligible verbiage. Woe to the physician who would learn psychotherapeutics from this work! And finally, if one wants to learn something new here, he has also to swallow all the bombast of a high-sounding phraseology. Neutra speaks as if he had discovered the neuroses or at least been the first to make them intelligible. All investigations lead to Neutra.

Rightly he preaches that synthesis must follow analysis. But why does he write as if he had discovered psychosynthesis and been the first to insist on it? The Swiss school (Jung and Maeder) has for years been fighting about psychosynthesis and anagogic analysis. In his last book Freud disputes with them concerning these matters; but Neutra usurps the method as well as the name, without even mentioning the name of the man who coined the word. I shall help him a little. In my essay on "The Termination of the Psychoanalytic Treatment" (*Zentralblatt f. Ps., 1913, vol. 3*), I say (on p. 295). "To reconcile the patient with reality—that is the task of psychoanalysis. In so doing the analyst must play the rôle of educator, and that is why the calling of the psychoanalyst requires men who are above the average, to a certain extent creative artists, who

can really build human beings. After the analysis one has to apply synthesis, as Dr. B. Martin has so aptly said." * * *

Let us compare this with what Neutra says on p. 99: "In the treatment of the neuroses psychoanalysis is only the first link in the chain whose last link must be the erection of a new life-building. The technique of this I would call psychosynthesis." This "I" is delicious! Does not Neutra read the medical journals? Is he ignorant of the anagogic demands of the Zürich school?

If I were inclined to preserve my rights to priority I would have to write a book about Neutra's book, but that would not be worth while. But since when is science a subject for piracy? Neutra describes a simple association—experiment which now and then serves to throw light on something that the patient, for some reason or other, wants to conceal from the analyst. The patient is commanded to utter, one after the other, as quickly as possible, as large a number of single words as come to his mind on hearing the analyst utter a test-word. If the analyst possesses the gift of combining these he will discover a meaning in this apparently senseless conglomeration. Neutra does not tell us who devised this method [of running associations]; and he gives the impression that it was his invention. I described this method, as a modification of Jung's "method of associations", in my book on "nervous apprehensions" (*Nervöse Angstzustände, 1908*), page 300: "I have modified this method to this extent: if the patient has nothing to say concerning a particular element in one of his dreams, I pronounce the puzzling word and ask him to tell me a series of words that come to his mind spontaneously. This method may

be modified so as to merely ask the patient to mention 20 or 30 words that occur to him accidentally" [i. e., without deliberate choice].

I have wholly rejected this method since then, for I have found it of no practical value and only of scientific interest. Instead, I attack the subject of resistance and find my object if I have discovered and exposed the cause of the resistance. I consider Jung's method (of taking associations to 100 words) too laborious and unprofitable for application in actual practice.

I shall also mention it that the energetic theory of nervousness, as well as the pleasure energism are to be found in my brochure on "the causes of nervousness" (1907), in the chapter on prevention, where I discuss the law of the "revaluation of energies" and its significance for the psyche. And Neutra's pleasure-energy (eudaimonism) is contained in the closing words of that chapter: "Yes, what we are in need of is a new religion, a religion of pleasure in life."

But enough of personal claims. Let Jung, Adler, Freud and his pupils make their claims for priority, if they think it worth while doing so.

After all this censure let us say a few words of recognition. Neutra's book is the book of a physician who thinks. It contains much, borrowed as well as original, that is stimulating and suggestive, even though it is often couched in language that is almost incomprehensible. Here is Neutra's definition of hysteria: "Hysteria is to be regarded as a subconsciously determined self-deception, taking on the appearance of disease, serving pleasurable ends, and its physical aspects being correlated to the psychic." We may accept this definition without any

trepidation. But I must energetically protest against Neutra's propaganda for a "therapy of torture." "Where, finally, there is a subconscious will to be sick and where there is no preparedness for health, there neither suggestion nor logic (persuasion) will serve any purpose. Here the only thing that can be considered is to increase the patient's sufferings and frightening him, methods which, if carried out logically and to the necessary degree, will gradually make the patient amenable to the other therapeutic methods, by enforcing a preparedness for a cure." He closes his book with the words: "Quae medicamenta non sanant, ferrum sanat; quae ferrum non sanat, ignis sanat." [What medicaments will not cure, iron will cure; what iron does not cure, fire cures.] It is almost impossible to believe that a modern psychotherapist wrote those sentences! One often hears laymen say: "She only needs a good licking and she'll be rid of her hysterics!" Such erroneous views can be easily disproved by our practical experiences, even though now and then a club may have served as a curative agent. But a club usually only expels one devil to make room for another. Our rule must read: "Quae medicamenta non sanant, verbum sanat; quae verbum non sanat, amor sanat." [What words do not cure, love will.]

Stekel. (T.)

KINDBORG, DR. ERICH—*Suggestion, Hypnose u. Telepathie*. [S., Hypnotism and Telepathy.] Munich, Wiesbaden: J. F. Bergmann, 1920; five illustrations.

The author analyses the current notions about the concept embraced in the term Suggestion; notwithstanding a

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A Self-Interpreting Fairy Tale.....	<i>H. Silberer</i>
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